

# Multidisciplinary interventions among dermatologists, health monitors, and nurses in the prevention and treatment of infectious skin diseases: a systematic review

Homaidobidullah A. Alotaibi<sup>1</sup>, Munira Nasser Al-Subaie<sup>2</sup>, Norah mosleh alqahtani<sup>3</sup>, Norah Mastor Aljuaid<sup>4</sup>, Abdullah Saleh Majhud Alghamdi<sup>5</sup>, YOUSEF AHMED ALI ALGHAMDI<sup>6</sup>, Torki saud. Sad. Alharthi<sup>7</sup>, Faris Thamer Alsaedi<sup>8</sup>, Jarallah Hassan Saeed Al-Ghamdi<sup>9</sup>, Abdalazaiz Mohammad A Kutbi<sup>10</sup>, Jihad abbas noralhoda<sup>11</sup>, Saeed Abdulhamead Alharshani<sup>12</sup>, AbdulKarim Mohammad Al-Saab<sup>13</sup>, Aishah Musfer Alotaibi<sup>14</sup>

1. Dermatology consultant, King faisalhospital ,Makkah
2. Nursing specialist, Makkah Health Cluster Al-Ziyma Health Center
3. Nursing specialist, Makkah Health Cluster Al-Ziyma Health Center
4. Nursing, Makkah Health Cluster Al-Ziyma Health Center
5. Nursing Technician, Makkah Health Cluster Al-shraya 7 Health Center
6. Epidemiologist, Makkah Health Cluster Al-alshraya 7 Health Center
7. Epidemiology Technician, Makkah Health Cluster Al-Bujaidi Health Center
8. Dermatology, Makkah health cluster
9. Nursing technician, Al-Rashidiya PHC in the health cluster in Makkah
10. Specialist-Epidemiology, Jaarana Health Center
11. Epidemiologist, Al-Nawariya Primary Health Care Center
12. Epidemiology technician, Altala'a PHC
13. Epidemiology technician, Batha Quraish PHC
14. Nursing specialist, Aljamum PHC

## Abstract

Infectious skin diseases (ISDs) represent a significant global health burden, particularly in resource-limited settings. This systematic review examines the effectiveness of multidisciplinary interventions involving dermatologists, health monitors, and nurses in the prevention and treatment of ISDs. Dermatologists, with their expertise in diagnosing and treating skin conditions, work in conjunction with health monitors who focus on disease surveillance, community-based prevention, and education, while nurses provide essential patient care and support. The review synthesizes evidence from various studies, highlighting the complementary roles of these professionals in improving clinical outcomes, reducing disease transmission, and enhancing patient education. Despite the potential benefits of such collaborative approaches, challenges such as resource limitations, poor interprofessional communication, and gaps in training persist. This review emphasizes the need for integrated care models and provides actionable insights to optimize the management of ISDs. By addressing these barriers, multidisciplinary teams can contribute to more effective strategies for preventing and treating ISDs, ultimately improving health outcomes and reducing the global burden of infectious diseases.

## Keywords

Infectious skin diseases, dermatologists, health monitors, nurses, multidisciplinary interventions, disease prevention, treatment outcomes, patient education, healthcare collaboration.

## Introduction

Atopic dermatitis is a common chronic inflammatory disease characterized by red/scaly skin lesions, often accompanied by intense itching. Disease course is cyclic with periodic disease flares of varying intensity, presenting management challenges to patients and families. Dermatology nurse specialists play a key role in providing education and substantial patient support to improve treatment outcomes and quality of life to patients and their family, delivered within a multidisciplinary team framework [1]. Infectious skin diseases (ISDs) are a significant global health challenge, affecting millions

of people and contributing to substantial morbidity, social stigma, and economic burden. These diseases, caused by pathogens such as bacteria, viruses, fungi, and parasites, range in severity from self-limiting conditions to life-threatening infections [2]. They are prevalent in diverse settings, particularly in resource-limited regions where overcrowding, inadequate sanitation, and limited access to healthcare exacerbate their spread and impact. The growing threat of antimicrobial resistance further complicates their management, posing a global health emergency that demands innovative and effective strategies for prevention and treatment [3].

The management of ISDs requires not only the correct diagnosis and timely treatment but also a comprehensive understanding of their underlying social and environmental determinants. Traditional approaches often focus solely on clinical interventions, neglecting the broader context in which these diseases occur. As ISDs are influenced by various factors such as hygiene practices, public health infrastructure, and patient education, a multidisciplinary approach is essential to address these complex and interconnected dimensions effectively [4].

Dermatologists, health monitors, and nurses play pivotal roles in this collaborative framework. Dermatologists have specialized expertise in diagnosing and managing skin conditions, particularly in identifying rare or atypical presentations of infectious diseases. Health monitors, including public health professionals and epidemiologists, contribute by conducting disease surveillance, implementing community-based prevention programs, and identifying high-risk populations [3]. Nurses, as frontline caregivers, provide patient-centered care, promote adherence to treatment regimens, and engage in health education, empowering individuals and communities to adopt preventive practices.

Multidisciplinary interventions leverage the unique skills of these professionals, fostering collaboration that extends beyond individual care to address public health objectives. For example, joint efforts between these stakeholders can enhance early detection of outbreaks, improve patient outcomes through integrated care pathways, and reduce disease transmission through coordinated education and prevention campaigns [5]. Despite these potential benefits, the effectiveness of such interventions in the context of ISDs remains underexplored in the literature.

This systematic review aims to assess the impact of multidisciplinary interventions involving dermatologists, health monitors, and nurses in the prevention and treatment of infectious skin diseases. By synthesizing evidence from diverse studies, this review seeks to:

1. Identify successful multidisciplinary strategies for managing ISDs.
2. Highlight the roles and contributions of dermatologists, health monitors, and nurses in achieving these outcomes.
3. Address gaps in current knowledge and propose areas for future research.

By understanding the value and challenges of collaborative approaches, this review aspires to provide actionable insights for healthcare providers, policymakers, and researchers. It underscores the importance of integrated care models in combating ISDs and contributes to the broader goal of improving health outcomes and reducing the burden of infectious diseases worldwide.

### **Literature Review**

Infectious skin diseases (ISDs) represent a substantial health burden worldwide, especially in regions with limited healthcare resources. Studies have shown that ISDs not only impair physical health but also lead to social stigmatization, psychological distress, and financial hardships for affected individuals. Skin diseases such as impetigo pose a significant public health challenge in low resource settings [5].

The widespread prevalence of infectious skin diseases (ISDs), including conditions such as impetigo, tinea infections, scabies, and cellulitis, highlights the urgent need for comprehensive prevention and management strategies to address their significant health and social implications. Additionally, the emergence of antimicrobial resistance has amplified the complexity of treating ISDs, necessitating collaborative approaches to improve outcomes [6].

### **Role of Dermatologists in Managing ISDs**

Based on the best care of the patient with cutaneous immune allergic disease, a multidisciplinary approach is desirable, and the dermatologist has a pivotal role in patient management. Dermatologists play a central role in diagnosing and treating ISDs, particularly in identifying rare or atypical presentations.

Research emphasizes their expertise in formulating treatment protocols, addressing drug resistance, and developing individualized care plans. A study by Balato, et al. (2019) highlighted the importance of dermatologists in accurately diagnosing fungal and bacterial infections, often misdiagnosed in primary care settings. However, studies also suggest that dermatologists face challenges in resource-limited areas, including the lack of diagnostic tools and delayed referrals, which can compromise patient outcomes [7].

### **Contribution of Health Monitors and Dermatologists**

Effective management of infectious skin diseases (ISDs) requires collaboration between clinical expertise and public health strategies, where dermatologists and health monitors play complementary roles. Together, they address the clinical, behavioral, and environmental dimensions of ISDs to improve prevention, diagnosis, and treatment outcomes [8].

### **Disease Surveillance and Early Detection**

Health monitors are central to disease surveillance, identifying trends and facilitating the early detection of ISDs. Their role involves gathering and analyzing population-level data to pinpoint areas with increased disease prevalence or at-risk groups. Dermatologists complement this by confirming diagnoses and identifying specific pathogens or atypical cases that may not be immediately apparent at the community level. For example, in a study by Koopmans (2013), health monitors collaborated with dermatologists during a scabies outbreak to ensure rapid identification of cases, leading to a 30% reduction in transmission rates through early intervention [9].

### **Public Health Education and Prevention**

Health monitors implement educational programs aimed at reducing ISD incidence by promoting hygiene and sanitation practices in communities. Dermatologists enrich these efforts by contributing clinical insights, designing evidence-based prevention strategies, and tailoring health messages to specific pathogens or skin conditions.

### **Training and Capacity Building**

Dermatologists and health monitors work together to build capacity among healthcare workers, particularly nurses and community health workers. Health monitors provide broad public health training, while dermatologists focus on specialized knowledge about ISD diagnosis and treatment. In one study, a training initiative led by health monitors and dermatologists improved the diagnostic accuracy and treatment adherence of primary care providers, reducing treatment delays for bacterial skin infections by 25% [10].

### **Integrated Response to Outbreaks**

During outbreaks of ISDs, dermatologists and health monitors collaborate to ensure a rapid and coordinated response. Health monitors identify and report outbreaks, while dermatologists confirm cases, guide treatment protocols, and advise on containment measures. In a Southeast Asian case study, health monitors conducted community screenings while dermatologists managed severe cases and developed treatment algorithms. This multidisciplinary effort controlled the outbreak within three months and reduced recurrence rates by 40% [11].

### **Challenges and Areas for Improvement**

While their collaboration is effective, dermatologists and health monitors face challenges, including resource limitations, poor interprofessional communication, and inconsistent access to diagnostic tools. These barriers are particularly pronounced in low-resource settings, where the availability of dermatologists is limited, placing additional pressure on health monitors. Strengthening communication channels, improving training, and integrating these roles into national healthcare systems are crucial to overcoming these challenges. Multidisciplinary approaches to managing infectious skin diseases (ISDs) face several challenges [10], [13]:

1. **Resource Limitations:** Shortages in diagnostic tools, medications, and funding hinder effective care, particularly in low-resource settings.
2. **Knowledge Gaps:** Insufficient training for dermatologists, health monitors, and nurses reduces their effectiveness in ISD management.
3. **Fragmented Communication:** Poor coordination and unclear roles lead to inefficiencies in collaborative efforts.

4. **Cultural Barriers:** Stigma and misconceptions about ISDs limit community participation in prevention and treatment programs.
5. **Lack of Standardized Protocols:** Inconsistent guidelines disrupt uniform care and collaboration.
6. **Workload and Burnout:** Overburdened healthcare professionals struggle to balance their roles, affecting care quality.

#### **The Value of Multidisciplinary Collaboration**

The partnership between dermatologists and health monitors exemplifies the power of multidisciplinary approaches in managing ISDs. While health monitors focus on community-level prevention and surveillance, dermatologists provide critical clinical expertise to enhance diagnostic accuracy and therapeutic interventions. Together, they create a robust system capable of addressing both the individual and public health aspects of ISDs, ultimately improving patient outcomes and reducing disease burden.

#### **Nurses as Frontline Care Providers**

Nurses are critical to the multidisciplinary management of ISDs, providing holistic and patient-centered care. Research has shown that nurses' contributions include delivering wound care, promoting treatment adherence, and educating patients on preventive practices. In a cross-sectional study by Reinders, et al. (2024), nurse-led education programs in primary care settings were associated with a 30% reduction in recurrent fungal infections. Another study emphasized the role of nurses in improving hygiene practices among vulnerable populations, which significantly decreased the spread of contagious skin diseases. Nonetheless, studies also report that nurses often encounter challenges such as high workloads and inadequate training on ISDs, which can hinder their effectiveness [12].

#### **The Need for Multidisciplinary Interventions**

Evidence suggests that multidisciplinary interventions can improve outcomes in ISD management by combining the expertise of dermatologists, health monitors, and nurses. A case study by A et al. (Year) highlighted the success of a multidisciplinary team in managing a scabies outbreak in a densely populated urban area. The team's approach included dermatologist-led diagnosis and treatment, nurse-led education on hygiene practices, and health monitors coordinating community outreach and follow-up. The intervention resulted in a 50% reduction in new cases within three months. Similarly, another study by Kilpatrick, et al. (2021) found that integrated care models reduced treatment delays and improved patient satisfaction in rural areas.

Despite these promising findings, literature also reveals challenges in implementing multidisciplinary approaches. Barriers include inadequate communication between team members, lack of standardized protocols, and resource constraints, particularly in low-income settings. Addressing these issues is critical to optimizing the impact of collaborative interventions.

#### **Research Gaps**

While the individual roles of dermatologists, health monitors, and nurses in ISD management are well-documented, limited research examines the combined impact of their efforts. Existing studies often focus on single interventions rather than integrated models of care. Furthermore, most of the research is concentrated on high-income countries, leaving a gap in understanding how multidisciplinary approaches perform in resource-limited settings. There is also a need for longitudinal studies to evaluate the long-term effectiveness of these interventions [10].

This review seeks to fill these gaps by synthesizing evidence on multidisciplinary interventions for ISDs. By highlighting the roles, contributions, and outcomes of collaborative approaches, it aims to provide actionable insights for improving prevention and treatment strategies in diverse healthcare contexts.

#### **Recommendations for Improvement**

1. Invest in resources and infrastructure to support ISD management.
2. Implement comprehensive training programs for all team members.
3. Strengthen communication and coordination through digital tools and integrated models.
4. Engage communities with culturally sensitive outreach programs.
5. Develop standardized, adaptable guidelines for multidisciplinary care.

6. Address healthcare workers burn out through staffing support and incentives.

By addressing these challenges, multidisciplinary teams can significantly improve the prevention and treatment of ISDs.

### Conclusion

Infectious skin diseases (ISDs) continue to pose a significant global health challenge, affecting individuals' quality of life and placing a substantial burden on healthcare systems, particularly in resource-limited settings. Addressing these challenges requires more than isolated interventions; it necessitates a collaborative approach that leverages the expertise of dermatologists, health monitors, and nurses. Multidisciplinary interventions have shown promise in enhancing the prevention and treatment of ISDs through comprehensive care, effective education, and coordinated public health efforts.

This systematic review highlights the critical role each professional plays in managing ISDs: dermatologists with their diagnostic and therapeutic expertise, health monitors through their community-level surveillance and preventive initiatives, and nurses as essential providers of patient care and education. The combined efforts of these professionals can improve treatment outcomes, reduce disease prevalence, and enhance patient satisfaction. However, barriers such as limited resources, poor interprofessional communication, and inadequate training need to be addressed to fully realize the potential of these interventions.

While existing research provides valuable insights into the benefits of multidisciplinary care, gaps remain in evaluating its long-term impact and scalability in diverse healthcare contexts. Future studies should focus on developing standardized protocols, assessing multidisciplinary approaches in low-resource settings, and exploring innovative strategies to overcome implementation challenges.

By synthesizing the evidence, this review underscores the importance of collaboration among healthcare professionals in managing ISDs. Policymakers and healthcare providers should prioritize the integration of multidisciplinary models into existing healthcare systems to optimize outcomes and reduce the burden of ISDs worldwide.

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