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Site Disorders: Wart Site Reactions (burning, hypopigmentation, irritation, itching, pain, rash, sensitivity, studies, 1.2% (4/327) of the patients discontinued due to local skin/application site reactions. The incidence and severity of local skin reactions during controlled clinical trials are shown in the following table. Overall, in the 3X/week application clinical some patients also reported systemic reactions. These reactions were usually mild to moderate in intensity; however, severe reactions were reported with 3X/week application.

Local skin reactions such as erythema, erosion, excoriation/flaking, and edema are common. Should severe local skin reaction occur, the cream should be temporarily removed and the treatment area washed with mild soap and water. It is common for patients to experience local skin reactions such as erythema, erosion, excoriation/flaking, and edema at the site of application or surrounding areas. Most skin reactions are mild to moderate. Severe skin reactions can occur and should be reported promptly to the prescribing physician.

3. In severe cases the cream should be temporarily stopped and avoided. Female patients should take optional care of applying the cream at the opening of the vagina because local skin reactions on the vulva most surfaces will impair the site and may cause difficulty in passing time.

Some reports have been received of local hypotension and hypotension following Aldara use. Follow-up information suggests that these skin color changes may be permanent in some patients.

6. Application of Aldara cream in the vagina is considered internal and should be avoided. Female patients should take optional care of applying the cream at the opening of the vagina because local skin reactions on the vulva most surfaces will impair the site and may cause difficulty in passing time.

7. Some reports have been received of localized hypopigmentation and hyperpigmentation following Aldara use. Follow-up information suggests that these skin color changes may be permanent in some patients.

5. It is common for patients to experience local skin reactions such as erythema, erosion, excoriation/flaking, and edema at the site of application or surrounding areas. Most skin reactions are mild to moderate. Severe skin reactions can occur and should be reported promptly to the prescribing physician.

4. Application

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7. Some reports have been received of localized hypopigmentation and hyperpigmentation following Aldara use. Follow-up information suggests that these skin color changes may be permanent in some patients.

8. When treating genital warts, Aldara is applied to the skin in the genital area only. Never apply Aldara to the eye(s), mouth, external anogenital warts. It is recommended that 6-10 hours following Aldara 5% cream application the treatment area be washed with mild soap and water. It is common for patients to experience local skin reactions such as erythema, erosion, excoriation/flaking, and edema at the site of application or surrounding areas. Most skin reactions are mild to moderate. Severe skin reactions can occur and should be reported promptly to the prescribing physician.

In controlled clinical trials, the most frequently reported adverse reactions were those of local skin and application site reactions; some patients also reported systemic reactions. These reactions were usually mild to moderate in intensity; however, severe reactions were reported with 3X/week application.

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“DISABILITY INSURANCE” FROM PAGE 4

WHAT TO LOOK FOR

The renewability provision is one of the key features of an individual disability income insurance policy. This provision defines your rights when it comes to keeping your disability policy in force. If you purchase a policy that is non-cancelable and guaranteed renewable, you can remain in control of your financial security. The insurance company cannot cancel, increase your premiums, change any provisions or add restrictions to the policy — even if the issuing company no longer offers similar policies in the future.

DEFINITION OF TOTAL DISABILITY

Arguably, the definition of disability is the most important aspect of a disability policy. As a physician, you must pay careful attention to the definition of disability found in your policy as it will ultimately determine how any claim you make for benefits will be judged. There are three definitions of “disability” commonly found in the insurance industry, and each has significant differences.

Although difficult to find, own-occupation (also known as true or pure own-occupation) is usually the definition of choice for dermatologists as it is the most liberal definition of total disability available. This type of policy pays benefits if you are disabled and “not able to perform the material and substantial duties of your occupation.” Therefore, you would collect full disability benefits if you could no longer practice dermatology and/or perform dermatologic surgery, even if you decided to work in another occupation or medical specialty, earning the same or more income than you did as a dermatologist.

More common is modified own-occupation. This type of disability policy has become the most prevalent in the industry today and typically pays benefits if you are “unable to perform the substantial and material duties of your occupation and you are not working.” Although benefits are still contingent upon your ability to practice dermatology and/or perform dermatologic surgery, this definition will not allow you to continue receiving full disability benefits if you are working in another occupation or medical specialty.

The any occupation definition — the third and most restrictive of the three described here — is commonly found in group or association policies. Under this definition, you are eligible to receive benefits only if you are found to be “unable to work in any occupation which you are reasonably suited to by your education, training or experience.” Unfortunately, it is the insurance company that makes this determination and physicians, being as educated and well-trained as they are, will find it extremely difficult to collect benefits on this type of policy. You should take every precaution to avoid purchasing a policy that contains this definition.

Many policies offered to physicians today might incorporate an own-occupation with a modified own-occupation” definition. Here, the policy would contain a true “Own-Occupation” definition for a limited time period (typically one, two or five years), and then convert to the more restrictive modified own-occupation definition described above. Until recently, in certain states such as California and Florida, and for certain medical specialties, this was the best definition of disability made available.

OPTIONAL RIDERS

Unless your policy contains a residual disability rider, you may have to be totally disabled to collect any benefits. While an own-occupation policy protects your ability to practice dermatology and/or perform dermatologic surgery, it may not sufficiently protect your income level. There are many disabilities that might allow you to continue working in your occupation, on a limited basis, while suffering a loss of income. Adding a residual disability rider to your policy would allow you to continue receiving benefits, proportionate to your loss of income, if you returned to dermatology on a part-time basis.

Furthermore, with policies such as Modified “Own-Occupation” or “Any Occupation, this rider might allow you to continue receiving benefits if you decided to work in another occupation, or if the insurance company determined that you could work in another “reasonable” occupation with reduced earnings.

A Cost of Living Adjustment (COLA) Rider is designed to help your benefits keep pace with inflation after your disability has lasted for 12 months. This adjustment can be a flat percentage or tied to the Consumer Price Index. Ideally, you want a COLA that is adjusted annually on a compound interest basis with no “cap” on the monthly benefit. Although important, if cutting the cost of coverage is an issue, this might be the first optional rider to consider excluding from your policy.

A future purchase option rider is a must for young physicians. It provides you with the ability to increase your disability coverage, regardless of your future health, as your income rises. It is important to know when you can increase your coverage, as well as by what increments, on any given option date. Some companies may allow you to use your entire option in one year as long as your then current income warrants the increase; others, however, may limit the amount that you can purchase.

Policies vary greatly in terms of the definition of disability made available, the contract provisions offered and the premiums charged. It is more important than ever that you take the time to compare each of the policies you are considering, and understand how and why they differ. The best approach is to employ the services of a professional insurance agent who specializes in working with physicians. He or she will not only be familiar with your occupation, but with which companies’ policies are best suited to your particular specialty. Then you and the agent can decide which insurance company’s policy best meets your individual insurance needs.

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