
Can you share your best hints and tips for anyone looking to specialise in dermatology?



“Dermatology is a hugely competitive speciality to successfully get into and then complete higher training. It is a good idea to join dermatology societies at medical school or as a junior doctor, attend clinical meetings and conferences put on by the British Association of Dermatologists and Royal Society of Medicine, gear your CV towards dermatology related topics (e.g. audits, presentations, clinical papers), get experience in a wide range of medical specialities as this makes you a better doctor and improves your communication skills, and reach out to a friendly dermatologist for mentorship and guidance. Be enthusiastic and passionate about what you do and support many of the excellent skin charities and patient support groups which already exist.

What's the best piece of advice you've been given during your career?

“Always make sure that you are motivated by being a good doctor and continue to educate yourself. From a career point of view, this is the most important thing – clinical competence, maintaining emotional intelligence and a willingness to learn.

What has been your biggest challenge to date within your career and how did you overcome it?

“There have and always will be career challenges. These are very different within an organised structure such as the NHS and outside it being self-employed. As a dermatology trainee, a sudden loss of pay banding was a particularly difficult time. Luckily, working together with a group of very supportive registrars saw us through. If there are good people around you, you can always pull through and things usually end up working out in the end – even if that can be hard to see at the time!

What excites you most about the industry?

“Straddling the overlap between traditional medical dermatology, aesthetic medicine and beauty is definitely my favourite part of being in the industry. Ensuring that we are there to provide high quality information in an age of post-truth is hugely important to me.

What challenges do you expect to see in the next year?

“Dealing with ongoing poor information from search engines and social media is creating health anxiety and can become challenging when offering treatment in clinic. I think we are also going to see ongoing issues with non-medical staff carrying out injectable therapies and the risks associated with this.

What are some of the skin myths you would like to bust?

“1. Pores do not open or close. They are fixed openings on the skin surface and they do not have muscle around them allowing them to dilate or constrict. So steam does not open pores and cold water does not close them. Their size is largely determined by genetics and those with acne or blemish-prone skin are likely to have more prominent pores. We can try and minimise their appearance but not actually change their size.

2. Expensive skincare is not always better than cheaper skincare. It is about choosing the right product with the right ingredients for your skin type and concerns.

3. Diet and acne – for the vast majority of people going dairy-free will not “cure” people of their skin problem. There is a small, select group that may be sensitive to dairy (which is a large food group and current data suggests that skimmed milk may be more of an issue than full fat milk) but for most acne sufferers, the acne is driven by a combination of hormones and genetics.

What's your top skincare advice for the spring season

“Ensure you are wearing a regular broad-spectrum sunscreen minimum SPF 30 as the days get longer and we spend more time outdoors. This will reduce your risk of sunburn (excessive sunburns have been linked to skin cancer) and help prevent premature skin ageing.