

ORIGINAL ARTICLE

Public interest in dermatologic symptoms, conditions, treatments, and procedures during the COVID-19 pandemic: Insights from Google Trends

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Abstract

Coronavirus disease 2019 (COVID-19) pandemic had substantial effect both on daily life and medical practice. Internet data have been used to analyze the trends in public interest in various medical conditions and treatments. The aim of this study is to analyze the public interest in dermatologic symptoms, conditions, treatments, and procedures during the COVID-19 pandemic. Google Trends was queried for a total of 120 dermatological search queries. Three periods of 2020 ([March 15-May 9], [May 10-July 4], and [July 5-October 31]) were compared with the previous 4 years (2016-2019). A significantly decreased interest in skin cancers and certain dermatologic conditions (eg, pityriasis rosea and scabies) was observed throughout the study period. Whereas a significant increase of interest in dry skin, hair shedding, oily hair, atopic dermatitis, and hand eczema was detected during the study. An initial decrease in interest was followed by a significant increase for acne, comedones, melasma, rosacea, botox, dermaroller, and peeling. The study demonstrated a significant impact of the COVID-19 pandemic on the public interest in dermatology. The present results would help to create healthcare policies and information sources, which can meet the public demand. The reasons for the observed trends and their effect on patient outcomes might be of interest for future studies.

KEYWORDS

COVID-19, dermatology, Google, internet, public interest, skin disorders

1 | INTRODUCTION

The coronavirus disease 2019 (COVID-19), a novel infectious respiratory disease caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), first emerged in December 2019. The rapid and worldwide spread of the disease led to the declaration of a pandemic by WHO in March 2020. The number of confirmed cases has reached up to 60 million in 220 countries by 25th of November, 2020.¹ The global efforts to slow the spread of disease, including lockdown measures, have impacted the daily life, as well as the medical practice including dermatology. The main challenges encountered by the dermatologists and the patients during the pandemic include the

reduction of face-to-face consultations, the uncertainties about the monitoring of the patients with ongoing biologic and immunosuppressive treatments, the lack of information about the effect of dermatologic conditions and treatments on the risk of COVID-19, and the difficulties on the follow-up of the patients with chronic diseases or skin cancer.²

During recent years, internet data have been increasingly used to analyze the public behavior and interest in various medical conditions.³⁻⁸ Google Trends is the most popular tool and has been used to explore the interest in dermatologic conditions before and during the COVID-19 pandemic.⁸⁻¹⁵ Previous studies in dermatology have investigated the public interest in common dermatological conditions (eg,

acne, seborrheic dermatitis, and warts), cosmetic dermatology procedures, and COVID-19-related acral symptoms during the early phases of the outbreak.¹¹⁻¹⁴ In the present study we aimed to analyze the public interest in a wide range of dermatologic symptoms, conditions, treatments, and procedures using a very detailed set of search terms and a longer period of investigation for providing information on impact of different stages of pandemic on the public interest in dermatology. Therefore, the insights generated from this study would expand the knowledge produced in previous studies and increase our understanding in this new pandemic.

2 | METHODS

Google Trends, a freely available tool, provides information on frequencies of queries that people search on Google search engine. It normalizes the frequency of a search query to all queries, and presents results as a relative search volume ranging from 0 to 100; with larger scores denote greater popularity for the search query.

We determined search queries representing a wide spectrum of dermatologic symptoms, conditions, treatments, and procedures. Three different dermatologists (K.E.S., Ö.A.Ç., and A.S.) have discussed and decided the search terms through working on a shared online document. The terms were selected from the most frequent conditions, treatments and procedures using dermatology textbooks. The complete list of a total of 120 search queries is presented in Table 1. For each query, Google Trends was queried applying filters of "United States," "01/01/2016-11/17/2020," and "All categories." The Google Trends weekly data were exported for analysis.

Statistical analysis of data was carried out using SPSS version 21.0 (IBM Corp., Armonk, New York). Three periods of 2020 ([March 15-May 9], [May 10-July 4], and [July 5-October 31]) were compared with similar periods of the previous 4 years (2016-2019) to assess public interest in different stages of COVID-19 pandemic. Generalized estimating equations with gamma model were used in comparisons. A *P* value of less than .05 was considered to indicate statistical significance.

3 | RESULTS

The relative search volume for the dermatologic symptoms, conditions, treatments, and procedures was statistically significantly decreased for 52, 28, and 19 search terms during the first (March 15-May 9), second (May 10-July 4), and third (July 5-October 31) stages of the outbreak compared with similar periods in the preceding 4 years, respectively. On the contrary, there was a statistically significant increase in the relative search volume for 18, 36, and 36 search terms during these periods compared with the previous 4 years, respectively.

The relative search volume was statistically significantly decreased in all three periods for 14 search terms (erythema, angioedema, basal cell carcinoma, skin candida, *Demodex*, erythema

multiforme, melanoma, pityriasis rosea, scabies, skin cancer, tinea, Sklice + Soolantra, temovate + diprolene + dermovate + elocon + taclonex + calcitrene, and elidel). The relative search volume was statistically significantly increased in all three periods for 13 search terms (dandruff, dry skin, hair shedding, hyperpigmentation, oily hair, purple skin, atopic dermatitis, hand eczema, dupixent, ivermectin, tacrolimus ointment, pimecrolimus cream, and skin care).

The relative search volume for 15 search terms (callus, comedones, hair loss, skin irritation, wound, acne, dermatitis, melasma, rosacea, shingles, corticosteroid cream, Botox, Dermaroller, peeling, and skin) was increased significantly during the second and third stage while it was statistically significantly decreased or remained unchanged during the first stage of the outbreak (March 15-May 9).

Table 1 shows the changes in the relative search volume during three different periods (March 15-May 9, May 10-July 4, and July 5-October 31) in detail.

4 | DISCUSSION

The current study found that public interest in dermatologic symptoms, conditions, treatments, and procedures has significantly changed during different periods of COVID-19 pandemic when compared with the corresponding periods in the previous 4 years.

The interest in search terms including basal cell carcinoma, skin cancer, melanoma, erythema multiforme, scabies, pityriasis rosea, demodex, tinea, and skin candida has been decreased throughout the study period. Accordingly, a decreased interest in skin cancer during the COVID-19 pandemic has also been reported in Italy, Turkey, and the United States.^{11,14} This might be explained by the decrease in hospital/dermatology visits due to a fear to exposure to SARS-COV-2 and the resultant decrease in the diagnosis of these conditions or an increased concern for COVID-19 rather than the dermatologic conditions. A prolonged diagnostic delay might result in more advanced disease, increased morbidity and mortality, particularly in patients with skin cancers (eg, melanoma, non-melanoma skin cancer [NMSC; ie, basal cell carcinoma and squamous cell carcinoma]).¹⁶ In fact, a recent report from the United Kingdom has shown a decrease up to 47% in the number of non-melanoma skin cancer treated and melanoma patients undergoing sentinel lymph node biopsies.¹⁷ Moreover, studies from Italy showed a statistically significant increase in mean Breslow thickness during the post-lockdown phase compared with the pre-lockdown and decreased detection of melanoma during the COVID-19 pandemic.^{18,19} Another study from the United Kingdom has reported that the NMSCs excised in 2020 required significantly larger and more complex surgery than in 2019.²⁰ Altogether, these findings suggest an increased delay in the diagnosis of skin cancers, which in turn might result in more advanced disease requiring more complex surgical procedures. Implementation of teledermatology might help, at least partially to overcome these issues and effectively prioritize the patients in whom earlier treatment is needed.²¹

Unlike our study suggesting a decreased interest in scabies and pruritus, recent studies have reported an outbreak of scabies in Spain

TABLE 1 Relative search volume (RSV) of dermatologic symptoms, conditions, treatments and procedures

	March 15–May 9			May 10–July 4			July 5–October 31					
	2020	2016–2019	% Change	P value	2020	2016–2019	% Change	P value	2020	2016–2019	% Change	P value
	Blistering	44.38 ± 2.02	46.91 ± 1.81	-5.39	.352	74.63 ± 3.22	65.72 ± 2.21	13.56	.023	55.88 ± 3.19	57.93 ± 1.98	-3.54
Bruising	51 ± 1.98	70.09 ± 1.18	-27.24	<.001	75.38 ± 3.06	84 ± 1.48	-10.26	.011	76.06 ± 2.20	76.47 ± 1.12	-0.54	.867
Callus	51.0 ± 4.36	43.47 ± 0.96	17.32	.092	57.25 ± 1.38	48.13 ± 0.95	18.95	<.001	49.82 ± 1.22	46.04 ± 1.12	8.21	.022
Comedones	59.63 ± 3.82	53.38 ± 2.31	11.71	.162	73.25 ± 2.07	57.34 ± 2.52	27.75	<.001	75.53 ± 3.03	52.88 ± 1.70	42.83	<.001
Skin swelling	60.88 ± 2.85	64.25 ± 2.43	-5.25	.367	72.38 ± 5.74	60.88 ± 2.37	18.89	.064	71.59 ± 1.94	62.13 ± 1.69	15.23	<.001
Dandruff	86 ± 3.94	72.63 ± 1.54	18.41	.002	76.5 ± 2.26	61.78 ± 0.90	23.83	<.001	70.82 ± 1.26	62.79 ± 0.84	12.79	<.001
Dry skin	57.13 ± 2.13	52 ± 1.28	9.87	.039	53 ± 1.50	44.69 ± 0.69	18.59	<.001	48.82 ± 0.75	44.51 ± 0.67	9.68	<.001
Erythema	62.38 ± 1.77	77.97 ± 1.31	-19.99	<.001	67 ± 3.17	79.41 ± 1.20	-15.63	<.001	74.82 ± 1.2	79.5 ± 0.92	-5.89	.002
Hair loss	71.25 ± 3.29	70.28 ± 0.73	1.38	.774	85.25 ± 1.31	74.22 ± 0.90	14.86	<.001	92.06 ± 1.04	79.82 ± 0.51	15.33	<.001
Hair shedding	71.75 ± 5.89	48.78 ± 1.39	47.09	<.001	79.38 ± 2.17	55.06 ± 1.58	44.17	<.001	75.18 ± 1.28	59.63 ± 1.06	26.08	<.001
Hives	80.88 ± 0.98	83.56 ± 0.95	-3.21	.048	87.75 ± 1.99	90.34 ± 1.14	-2.87	.258	84.82 ± 2.08	86.31 ± 0.87	-1.73	.509
Sweating	61.63 ± 0.79	58.75 ± 1.01	4.90	.024	72.38 ± 2.87	72.84 ± 2.06	-0.63	.894	73 ± 2.73	72.29 ± 1.53	0.98	.821
Hyperpigmentation	75.63 ± 4.91	54.75 ± 1.99	38.14	<.001	93.25 ± 1.46	56.47 ± 1.72	65.13	<.001	79.53 ± 2.59	52.01 ± 1.33	52.91	<.001
Hypopigmentation	28.13 ± 3.87	37.44 ± 1.97	-24.87	.032	43.75 ± 3.45	42.16 ± 2.47	3.77	.707	46.71 ± 2.07	46.51 ± 1.59	0.43	.941
Skin irritation	58.63 ± 3.601	59.25 ± 1.1	-1.05	.868	72.25 ± 2.50	61.47 ± 1.47	17.54	<.001	65.76 ± 1.71	60.88 ± 1.20	8.02	.02
Itch	63.5 ± 1.58	59.03 ± 0.72	7.57	.01	82.13 ± 2.72	77.25 ± 1.82	6.32	.136	77.53 ± 2.56	73.49 ± 1.31	5.50	.159
Skin mole	57.5 ± 3.03	65.28 ± 1.34	-11.92	.019	83.5 ± 2.39	79.69 ± 1.74	4.78	.197	71.29 ± 1.96	67.43 ± 1.29	5.72	.099
Nail discoloration	37 ± 6.03	34.75 ± 2.25	6.47	.726	40.75 ± 4.19	35.61 ± 3.13	14.43	.326	41.35 ± 4.66	38.63 ± 2.18	7.04	.596
Nail thickening	38.86 ± 9.29	29.04 ± 4.04	33.82	.333	22.75 ± 2.41	31.88 ± 2.84	-28.64	.014	28.5 ± 2.60	26.91 ± 1.38	5.91	.589
Nevi	42.88 ± 3.90	61.63 ± 2.38	-30.42	<.001	53.88 ± 3.85	63.81 ± 2.40	-15.56	.029	59.82 ± 2.10	64.46 ± 1.36	-7.20	.064
Nevus	50.63 ± 4.20	78.09 ± 1.52	-35.16	<.001	66.13 ± 2.64	77.44 ± 1.49	-14.60	<.001	74.35 ± 1.70	76.94 ± 1.10	-3.37	.2
Oily skin	67.5 ± 2.63	71.66 ± 1.06	-5.81	.143	83.75 ± 3.56	76.16 ± 1.50	9.97	.049	77.71 ± 1.42	76.32 ± 1.16	1.82	.45
Oily hair	78.13 ± 2.92	64.56 ± 1.16	21.02	<.001	78.38 ± 1.93	58.97 ± 1.01	32.92	<.001	79.53 ± 2.23	64.12 ± 1.03	24.03	<.001
Onycholysis	46.38 ± 4.52	47 ± 2.51	-1.32	.904	59.5 ± 4.22	43.28 ± 2.28	37.48	.001	45.24 ± 3.70	49.07 ± 1.94	-7.81	.358
Pruritus	54 ± 1.81	61.31 ± 1.39	-11.92	.001	56.88 ± 1.56	57.28 ± 1.57	-0.70	.854	63.47 ± 1.37	64.59 ± 1.56	-1.73	.591
Purple skin	78.38 ± 3.62	62.53 ± 1.70	25.35	<.001	90.63 ± 1.31	71.66 ± 2.48	26.47	<.001	75.59 ± 2.12	63.41 ± 1.32	19.21	<.001
Rash	63.75 ± 2.41	64.47 ± 0.82	-1.12	.778	83.25 ± 1.18	81.88 ± 1.56	1.67	.482	68.82 ± 2.88	71.62 ± 1.31	-3.91	.377
Redness	73.38 ± 1.81	82.94 ± 1.36	-11.53	<.001	78.25 ± 1.23	79.84 ± 1.10	-1.99	.336	72.71 ± 1.14	75.1 ± 0.80	-3.18	.085
Skin scaling	33.88 ± 3.18	39.66 ± 3.13	-14.57	.195	39.63 ± 4.83	36.69 ± 3.20	8.01	.612	38.35 ± 3.45	41.51 ± 2.23	-7.61	.442
Skin discoloration	65.38 ± 3.55	64.25 ± 1.76	1.76	.777	80 ± 2.84	74.34 ± 1.80	7.61	.092	69.12 ± 1.63	66.9 ± 1.68	3.32	.342
Skin ulcer	57.25 ± 2.99	47.44 ± 2.73	20.68	.015	64.75 ± 3.18	48.13 ± 2.64	34.53	<.001	57.82 ± 2.43	53.87 ± 1.80	7.33	.190
Mouth ulcer	78.5 ± 2.81	70.44 ± 1.87	11.44	.017	76.63 ± 2.37	73.66 ± 1.74	4.03	.313	77.18 ± 2.22	72.99 ± 1.16	5.74	.094

(Continues)

TABLE 1 (Continued)

	March 15–May 9			May 10–July 4			July 5–October 31					
	2020	2016–2019	% Change	P value	2020	2016–2019	% Change	P value	2020	2016–2019	% Change	P value
	Wheal	28.0 ± 1.49	30.91 ± 1.29	-9.41	.14	31.88 ± 2.21	30.22 ± 1.40	5.49	.527	31.06 ± 2.43	34.82 ± 1.41	-10.80
Wound	77.38 ± 1.05	78.72 ± 1.05	-1.70	.364	87.50 ± 2.05	82.44 ± 1.4	6.14	.041	93.47 ± 0.89	83.71 ± 0.91	11.66	<.001
Acne	86.5 ± 3.22	87.44 ± 0.86	-1.08	.778	94.88 ± 1.40	86.5 ± 0.79	9.69	<.001	91.82 ± 0.93	86.76 ± 0.68	5.83	<.001
Actinic keratosis	47.88 ± 2.88	64.91 ± 2.04	-26.24	<.001	62.63 ± 2.75	69.0 ± 2.13	-9.23	.067	64.29 ± 1.81	64.84 ± 1.41	-0.85	.812
Angioedema	35.13 ± 1.67	46.44 ± 1.05	-24.35	<.001	38.88 ± 1.32	46.84 ± 1.09	-16.99	<.001	41.82 ± 1.20	50.38 ± 1.13	-16.99	<.001
Aphthous stomatitis	32.0 ± 0.0	47.43 ± 5.23	-32.53	.003	33.0 ± 0.47	43.2 ± 0.51	-23.61	<.001	46.67 ± 9.54	46.93 ± 3.38	-0.55	.980
Atopic dermatitis	49.63 ± 7.29	32.28 ± 1.71	53.75	.020	42.0 ± 1.43	33.19 ± 1.85	26.54	<.001	39.18 ± 0.96	33.38 ± 1.17	17.38	<.001
Basal cell carcinoma	50.38 ± 2.22	77.19 ± 1.61	-34.73	<.001	65.13 ± 2.23	77.56 ± 1.87	-16.03	<.001	75.71 ± 1.86	80.13 ± 1.14	-5.52	.042
Skin candida	23.88 ± 3.32	38.28 ± 2.75	-37.62	.001	26.75 ± 2.41	35.0 ± 1.49	-23.57	.004	26.59 ± 1.68	32.87 ± 1.14	-19.11	.002
Chickenpox	47.38 ± 2.21	40.59 ± 3.17	16.73	.079	38.88 ± 1.92	37.47 ± 1.43	3.76	.557	44.18 ± 1.21	38.62 ± 0.95	14.40	<.001
Contact dermatitis	71.5 ± 1.75	64.78 ± 1.64	10.37	.005	78.13 ± 1.66	70.97 ± 1.72	10.09	.003	72.35 ± 1.70	70.44 ± 1.36	2.71	.381
Cosmetic allergy	25.5 ± 0.35	43.81 ± 4.60	-41.79	<.001	46.0 ± 4.95	43.0 ± 4.70	6.98	.660	46.83 ± 8.21	36.33 ± 1.18	28.90	.205
Demodex	21.88 ± 1.53	25.53 ± 0.75	-14.30	.031	22.5 ± 0.83	30.31 ± 2.15	-25.77	.001	23.12 ± 0.87	25.96 ± 0.38	-10.94	.003
Dermatitis	83.63 ± 3.46	77.59 ± 1.68	7.78	.116	90.88 ± 0.65	80.53 ± 1.79	12.85	<.001	86.12 ± 0.84	81.38 ± 1.29	5.82	.002
Diaper dermatitis	32.75 ± 4.93	44.16 ± 3.07	-25.84	.050	34.88 ± 3.62	34.86 ± 2.82	0.06	.998	38.24 ± 3.58	40.33 ± 2.53	-5.18	.633
Drug allergy	40.5 ± 2.59	44.31 ± 1.94	-8.60	.239	33.63 ± 1.49	40.13 ± 2.13	-16.20	.012	39.0 ± 2.57	36.54 ± 1.10	6.73	.379
Drug eruption	31.88 ± 6.31	40.23 ± 2.97	-20.76	.231	33.25 ± 3.38	40.9 ± 3.24	-18.70	.102	35.41 ± 3.36	39.49 ± 2.18	-10.33	.309
Erythema multiforme	37.63 ± 3.28	55.94 ± 2.23	-32.73	<.001	42.0 ± 2.09	51.72 ± 2.05	-18.79	.001	43.76 ± 1.79	54.93 ± 1.44	-20.33	<.001
Eczema	79.0 ± 2.63	80.06 ± 1.71	-1.32	.735	84.38 ± 1.37	79.0 ± 1.68	6.81	.013	73.94 ± 0.89	72.63 ± 1.08	1.80	.351
Fungal skin infection	46.25 ± 3.26	49.88 ± 1.90	-7.28	.337	57.88 ± 3.21	61.28 ± 2.44	-5.55	.398	56.24 ± 1.63	60.44 ± 1.78	-6.95	.081
Hand eczema	71.75 ± 4.25	46.5 ± 2.11	54.30	<.001	67.38 ± 4.20	49.88 ± 2.01	35.08	<.001	58.0 ± 2.60	47.37 ± 1.56	22.44	<.001
Herpes zoster	63.25 ± 2.55	70.59 ± 1.70	-10.40	.016	66.38 ± 2.54	69.19 ± 1.69	-4.06	.356	70.47 ± 1.81	71.71 ± 0.97	-1.73	.547
Hyperhidrosis	11.63 ± 0.75	14.38 ± 0.56	-19.12	.003	17.38 ± 0.75	19.03 ± 1.81	-8.67	.398	21.06 ± 4.82	17.85 ± 0.84	17.98	.512
Ichthyosis	17.25 ± 1.28	20.66 ± 1.21	-16.51	.054	14.0 ± 0.90	24.09 ± 2.90	-41.88	.001	16.06 ± 1.08	18.04 ± 0.78	-10.98	.136
Melanoma	41.63 ± 1.62	65.03 ± 1.79	-35.98	<.001	55.13 ± 1.47	68.06 ± 0.86	-19.0	<.001	54.71 ± 0.76	62.59 ± 0.76	-12.59	<.001
Melasma	47.75 ± 4.45	41.72 ± 1.27	14.45	.193	83.13 ± 4.70	55.47 ± 1.78	49.86	<.001	70.18 ± 3.61	49.03 ± 1.54	43.14	<.001
Miliaria	47.75 ± 7.51	39.91 ± 2.40	19.64	.320	58.5 ± 2.86	58.44 ± 3.08	0.10	.988	46.24 ± 4.10	50.84 ± 2.43	-9.05	.334
Milium	26.13 ± 2.19	25.97 ± 2.31	0.62	.960	32.38 ± 1.02	30.16 ± 2.33	7.36	.383	24.24 ± 2.10	33.18 ± 1.98	-26.94	.002
Molluscum	62.0 ± 2.33	77.38 ± 1.32	-19.88	<.001	81.0 ± 2.41	84.91 ± 1.34	-4.60	.157	71.53 ± 1.77	77.6 ± 1.21	-7.82	.005
Mycosis fungoides	18.63 ± 1.72	19.44 ± 1.04	-4.17	.687	19.75 ± 2.11	20.19 ± 0.88	-2.18	.848	19.94 ± 1.13	20.26 ± 0.74	-1.58	.811
Pediculosis	46.63 ± 4.30	56.09 ± 2.41	-16.87	.055	46.75 ± 4.87	43.97 ± 2.33	6.32	.607	51.71 ± 4.04	50.13 ± 2.26	3.15	.734
Pemphigoid	6.25 ± 0.42	9.47 ± 0.34	-34.0	<.001	9.38 ± 0.43	10.13 ± 0.50	-7.40	.254	10.53 ± 0.40	10.56 ± 0.31	-0.28	.954

TABLE 1 (Continued)

	March 15–May 9			May 10–July 4			July 5–October 31					
	2020	2016–2019	% Change	P value	2020	2016–2019	% Change	P value	2020	2016–2019	% Change	P value
	Pemphigus	44.5 ± 3.61	48.22 ± 1.48	-7.71	.340	43.13 ± 1.97	50.34 ± 1.51	-14.32	.004	49.12 ± 1.65	53.31 ± 1.49	-7.86
Pityriasis rosea	54.5 ± 2.28	77.5 ± 1.74	-29.68	<.001	66.75 ± 1.86	73.28 ± 1.98	-8.91	.016	56.29 ± 1.49	67.43 ± 1.15	-16.52	<.001
Psoriasis	71.0 ± 1.21	75.56 ± 1.48	-6.03	.017	75.0 ± 0.88	74.22 ± 1.37	1.05	.632	71.0 ± 1.08	71.5 ± 0.75	-0.70	.704
Rosacea	72.0 ± 2.91	82.13 ± 1.49	-12.33	.002	72.75 ± 1.68	67.5 ± 1.32	7.78	.014	63.24 ± 0.77	60.16 ± 0.81	5.12	.006
Scabies	37.0 ± 1.02	60.03 ± 1.69	-38.36	<.001	41.63 ± 0.98	63.81 ± 0.90	-34.76	<.001	41.06 ± 0.70	63.79 ± 0.87	-35.63	<.001
Seborrheic dermatitis	76.88 ± 3.12	75.28 ± 1.65	2.13	.652	79.5 ± 1.87	75.13 ± 1.73	5.82	.086	77.94 ± 1.76	73.96 ± 1.12	5.38	.056
Seborrheic keratosis	43.13 ± 1.90	62.03 ± 1.87	-30.47	<.001	63.25 ± 3.0	67.56 ± 1.70	-6.38	.211	69.65 ± 1.59	67.82 ± 1.60	2.70	.418
Skin cancer	55.88 ± 2.64	78.38 ± 1.39	-28.71	<.001	77.63 ± 2.05	87.56 ± 0.93	-11.34	<.001	70.41 ± 1.26	74.96 ± 1.20	-6.07	.009
Shingles	66.75 ± 1.93	73.69 ± 1.19	-9.42	.002	79.13 ± 1.29	75.91 ± 1.00	4.24	.049	91.94 ± 1.09	78.21 ± 0.81	17.56	<.001
Squamous cell carcinoma	29.25 ± 0.70	39.41 ± 1.72	-25.78	<.001	36.5 ± 1.38	38.28 ± 0.82	-4.65	.267	40.76 ± 1.31	40.53 ± 1.14	0.57	.892
Stevens Johnson syndrome	37.5 ± 3.27	40.53 ± 2.01	-7.48	.430	35.38 ± 1.95	42.5 ± 2.82	-16.75	.038	36.35 ± 2.02	43.65 ± 1.43	-16.72	.003
Syphilis	23.88 ± 0.12	26.34 ± 0.45	-9.34	<.001	24.75 ± 0.46	24.09 ± 0.36	2.74	.259	23.71 ± 0.33	24.24 ± 0.28	-2.19	.221
Tinea	51.25 ± 1.86	64.66 ± 1.18	-20.74	<.001	66.88 ± 2.13	73.69 ± 1.37	-9.24	.007	66.53 ± 1.37	74.12 ± 1.09	-10.24	<.001
Varicella	46.75 ± 1.92	61.63 ± 1.54	-24.14	<.001	52.75 ± 2.21	65.75 ± 1.43	-19.77	<.001	64.59 ± 1.50	68.01 ± 1.20	-5.03	.075
Vasculitis	29.5 ± 1.36	38.47 ± 0.66	-23.32	<.001	37.75 ± 0.98	40.69 ± 2.04	-7.23	.194	34.94 ± 0.88	38.69 ± 0.53	-9.69	<.001
Verruca	26.63 ± 3.66	27.63 ± 1.11	-3.62	.794	33.88 ± 2.92	29.78 ± 1.80	13.77	.232	37.18 ± 1.44	35.35 ± 1.65	5.18	.405
Vitiligo	40.13 ± 2.30	46.53 ± 1.27	-13.75	.015	57.0 ± 3.70	55.09 ± 1.46	3.47	.631	55.82 ± 1.53	56.91 ± 1.29	-1.92	.586
Urticaria	54.38 ± 2.62	56.09 ± 1.23	-3.05	.552	56.0 ± 1.34	55.13 ± 1.09	1.58	.612	55.53 ± 0.93	58.44 ± 1.22	-4.98	.059
Wart	68.88 ± 2.65	73.06 ± 0.76	-5.72	.129	83.13 ± 1.44	82.78 ± 1.03	0.42	.846	76.88 ± 1.56	78.81 ± 1.14	-2.45	.318
Zoster	63.25 ± 1.60	73.31 ± 1.61	-13.72	<.001	70.75 ± 3.03	76.44 ± 1.91	-7.44	.112	76.88 ± 1.83	76.32 ± 1.25	0.73	.801
Acitretin	34.5 ± 4.21	42.22 ± 2.84	-18.29	.128	32.5 ± 2.57	48.94 ± 2.89	-33.59	<.001	41.88 ± 2.62	45.93 ± 1.87	-8.82	.209
Soriatane	21.86 ± 3.76	31.8 ± 2.10	-31.26	.021	33.0 ± 5.67	34.08 ± 2.55	-3.17	.863	28.81 ± 3.39	29.61 ± 2.06	-2.70	.840
Dupilumab	17.63 ± 2.65	20.0 ± 1.69	-11.85	.449	22.63 ± 1.33	17.59 ± 1.34	28.65	.008	23.0 ± 2.05	20.97 ± 1.53	9.68	.428
Dupixent	62.0 ± 3.00	29.75 ± 3.65	108.40	<.001	65.25 ± 3.19	28.5 ± 3.00	128.95	<.001	75.06 ± 2.48	37.94 ± 2.70	97.84	<.001
Emollients	24.63 ± 2.44	23.88 ± 1.77	3.14	.804	25.43 ± 3.52	25.35 ± 3.08	0.32	.987	25.12 ± 1.83	23.61 ± 1.37	6.40	.510
Isotretinoin	57 ± 3.24	54.97 ± 2.3	3.69	.609	57.63 ± 2.94	51.38 ± 2.33	12.16	.058	57.18 ± 2.36	51 ± 1.46	12.12	.026
Accutane + Absorica + Amnesteem + Claravis + Myorisan	61.63 ± 1.25	66.63 ± 0.97	-7.50	.002	68.63 ± 1.59	65.16 ± 1.23	5.33	.085	68.65 ± 0.748	64.59 ± 0.89	6.29	<.001
Ivermectin	27.5 ± 10.49	5.88 ± 0.12	367.69	.039	10.88 ± 0.57	5.97 ± 0.13	82.24	<.001	12.18 ± 1.06	5.49 ± 0.10	121.86	<.001
Stromectol	28.38 ± 10.36	11.31 ± 1.08	150.93	.101	14.63 ± 1.39	10.81 ± 0.73	35.34	.015	12.44 ± 1.51	11.13 ± 0.67	11.77	.429

(Continues)

TABLE 1 (Continued)

	March 15–May 9			May 10–July 4			July 5–October 31					
	2020	2016–2019	% Change	P value	2020	2016–2019	% Change	P value	2020	2016–2019	% Change	P value
	Sklice + Soolantra	41.63 ± 2.85	50.13 ± 2.50	-16.96	.025	37.88 ± 2.37	51.81 ± 1.71	-26.89	<.001	43.65 ± 2.77	50.56 ± 1.30	-13.67
Omalizumab	31.13 ± 4.19	34.44 ± 2.24	-9.61	.486	32.38 ± 3.41	32.28 ± 2.13	0.31	.981	38.47 ± 3.79	34.62 ± 1.72	11.12	.355
Xolair	57.5 ± 2.46	65.44 ± 2.31	-12.13	.019	57.63 ± 2.0	66.0 ± 2.70	-12.68	.013	67.76 ± 2.32	66.62 ± 1.78	1.71	.695
Sunscreen	31.63 ± 4.44	39.66 ± 2.37	-20.25	.110	75.38 ± 4.29	71.13 ± 2.53	5.97	.393	37.29 ± 4.09	28.5 ± 1.97	30.84	.053
Sun protection	41.75 ± 4.7	48.78 ± 1.91	-14.41	.166	73.88 ± 3.80	73.13 ± 2.12	1.03	.863	41.06 ± 4.92	37.1 ± 2.19	10.67	.462
Corticosteroid cream	58.25 ± 6.21	45.63 ± 2.49	27.66	.059	75.75 ± 4.47	48.34 ± 3.07	56.70	<.001	60.88 ± 2.12	49.94 ± 2.07	21.91	<.001
Temovate + diprolene + dermivate + eloclon + tacionex + calcitrene	44.75 ± 2.51	62.41 ± 2.31	-28.30	<.001	56.0 ± 2.77	62.5 ± 2.30	-10.40	.071	55.29 ± 2.95	62.51 ± 1.41	-11.55	.027
Tacrolimus ointment	55.0 ± 3.72	38.94 ± 3.08	41.24	.001	72.38 ± 3.59	47.16 ± 2.77	53.48	<.001	75.94 ± 2.95	46.93 ± 2.09	61.82	<.001
Protopic	38.88 ± 4.84	52.0 ± 3.08	-25.23	.022	49.25 ± 2.96	52.28 ± 2.57	-5.80	.440	49.24 ± 3.40	55.54 ± 1.71	-11.34	.098
Pimecrolimus cream	43.0 ± 4.71	22.38 ± 1.68	92.14	<.001	38.13 ± 5.02	26.27 ± 2.63	45.15	.036	53.47 ± 4.36	27.87 ± 1.79	91.86	<.001
Elidel	45.0 ± 2.78	71.84 ± 2.24	-37.36	<.001	51.63 ± 3.61	66.69 ± 2.40	-22.58	.001	51.35 ± 1.89	66.22 ± 1.63	-22.46	<.001
Botox	32.88 ± 2.17	51.94 ± 1.36	-36.70	<.001	58.13 ± 1.87	49.16 ± 1.10	18.25	<.001	63.41 ± 0.79	48.82 ± 0.96	29.89	<.001
Dermapen	36 ± 2.62	59.38 ± 2.47	-39.37	<.001	50.63 ± 2.44	55.31 ± 2.78	-8.46	.205	45.65 ± 2.76	53.84 ± 1.50	-15.21	.009
Dermaroller	55.5 ± 5.84	60.34 ± 1.69	-8.02	.426	64.5 ± 3.73	53.47 ± 1.66	20.63	.007	51.47 ± 3.46	51.34 ± 1.38	0.25	.972
Dermal filler	36.75 ± 5.64	44.69 ± 2.60	-17.77	.201	53.75 ± 6.86	46.78 ± 2.68	14.90	.344	64.35 ± 4.50	44.18 ± 1.75	45.65	<.001
Fractional Laser	16.13 ± 2.03	39.84 ± 2.57	-59.51	<.001	31.5 ± 3.47	31.97 ± 1.33	-1.47	.900	31.35 ± 1.81	35.57 ± 1.62	-11.86	.082
Laser epilation	30.88 ± 4.01	38.52 ± 2.73	-19.83	.115	32.5 ± 2.98	35.56 ± 2.64	-8.61	.442	36.36 ± 4.03	42.25 ± 2.52	-13.94	.215
Peeling	66 ± 4.19	58.56 ± 0.88	12.70	.083	89.38 ± 2.66	72 ± 1.56	24.14	<.001	73.06 ± 2.80	64.46 ± 1.46	13.34	.006
Patch testing	52.25 ± 6.97	46.69 ± 3.43	11.91	.474	52.75 ± 6.27	42.22 ± 2.31	24.94	.115	62.41 ± 4.40	44.1 ± 1.83	41.52	<.001
Skin Prick test	25.17 ± 5.72	32.83 ± 3.25	-23.33	.244	30.38 ± 6.26	27.3 ± 2.30	11.28	.644	29.38 ± 2.49	23.81 ± 1.20	23.39	.044
Skin allergy test	31.13 ± 1.95	51.78 ± 2.88	-39.88	<.001	43.25 ± 3.05	52.38 ± 2.7	-17.43	.025	48 ± 3.00	46.41 ± 1.67	3.43	.644
Phototherapy	61.13 ± 5.03	58.22 ± 1.81	5.0	.587	52.5 ± 3.55	51.81 ± 1.26	1.33	.855	57.88 ± 3.22	53.46 ± 1.35	8.27	.204
PRP	51.13 ± 1.60	68.97 ± 2.13	-25.87	<.001	69.63 ± 1.89	66.72 ± 1.82	4.36	.268	80.82 ± 1.40	68.81 ± 1.44	17.45	<.001
Mesotherapy	25 ± 2.40	50.5 ± 2.39	-50.5	<.001	50.88 ± 3.36	48.84 ± 2.84	4.18	.645	59.06 ± 3.92	46.1 ± 1.55	28.11	.002
Skin	84.38 ± 3.38	79.72 ± 0.72	5.85	.178	96.25 ± 0.93	83.47 ± 0.95	15.31	<.001	88.59 ± 1.23	79.03 ± 0.88	12.10	<.001
Skin care	83.63 ± 5.17	70.63 ± 0.84	18.41	.013	90.88 ± 2.06	68.31 ± 1.24	33.04	<.001	79.71 ± 1.30	66.32 ± 0.78	20.19	<.001
Dermatologist	43 ± 2.34	79.03 ± 0.94	-45.59	<.001	75.88 ± 2.91	83.25 ± 1.04	-8.85	.017	80.35 ± 0.68	80.94 ± 1.10	-0.73	.649

Notes: Plus-minus values are means ± standard error (generalized estimating equations).

Abbreviation: PRP, platelet rich plasma.

and Turkey.^{22,23} The increase of scabies was attributed to the increased transmission due to closer contact among family members and delay in diagnosis during the lockdown. This discrepancy could be attributed to the differences in the socioeconomic status of the study populations or merely to the lack of correlation between the incidence of scabies and public interest in these search terms. Considering the increased global burden of scabies,^{24,25} the future studies investigating the changes in scabies epidemiology during COVID-19 pandemic would be of benefit to prevent potential scabies outbreaks during the lockdowns in the future.

Another important finding of the present study was the increased interest in dry skin, atopic dermatitis, hand eczema, tacrolimus ointment, pimecrolimus cream, and skin care all through the study period. In line with our findings, a previous study from the United Kingdom has reported a similar trend for hand eczema during the COVID-19 pandemic.¹² It seems possible that these results are due to more strict hygiene practices, that is, more frequent use of soaps and alcohol-based hand sanitizers which might lead to the development of contact dermatitis.²⁶ Indeed, an increased incidence of dermatitis associated with the hygiene practices and the use of personal protective equipment (PPE) during the pandemic has been reported.^{27,28} Despite the efforts for the prevention of contact dermatitis associated with hygiene practices,²⁹ there still seems to be room for improvement in community education on safe and effective hygiene practices.

The current study found a continuous increase of interest in dandruff, oily hair, and hair shedding which are most commonly associated with seborrheic dermatitis and telogen effluvium. This result can be well-expected considering that these conditions might exacerbate in response to elevated levels of psychological stress³⁰ which is a well-characterized impact of COVID-19.³¹ The stable increase in the interest for the term “purple skin” is also of interest, despite being foreseeable. Among the various dermatologic manifestations of COVID-19, pseudochilblain lesions involving acral areas (also described as COVID toes) and livedo-like lesions might present as purplish discoloration of the skin.³² Accordingly with our results, an increased public interest in acral lesions (ie, coronavirus toes, coronavirus fingers) has also been demonstrated in a prior study from France.¹³

Another finding of this study was the initially decreased interest in “comedones, acne, melasma, rosacea, Botox, Dermaroller, peeling, and skin” followed by an increased interest. The initial decrease of interest may be anticipated as the public interest was more focused on COVID-19 rather than the dermatologic conditions or cosmetic procedures. There are several possible explanations for the subsequent increase of interest in these terms. First of all, the extended duration of lockdown and stay-at-home policies might have caused visible and frequent facial lesions such as acne, rosacea, comedones, and melasma to draw greater attention. Accordingly, a recent report showed an increase in appearance-focused behaviors (eg, mirror checking, appearance comparisons) in patients with higher dysmorphic concern during the COVID-19 pandemic due to the closure of beauty services.³³ Moreover, another study reported an association between COVID-19-related stress negative body image in adults.³⁴ The subsequent increase of interest in cosmetic procedures such as

botulinum toxin injections, dermaroller, and chemical peeling may also be explained by these findings. Another possible explanation is the exacerbation of acne and rosacea induced by the use of protective masks.³⁵ Previous studies have reported a similar trend for cosmetic procedures^{11,12,14} but in the United Kingdom there was an increased interest in acne during the initial phases of the pandemic which was attributed to public desire for self-treatment of acne.¹²

Some limitations of the present study need to be acknowledged. First, the results should be interpreted cautiously before extrapolating to the general population because the source of data was confined to the population with access to the internet and Google searches. Nonetheless, the fact that Google's search engine market share of 88%³⁶ and the internet usage rate among US adults of 90%,³⁷ enables our study to cover a major segment of the general population. Another limitation is the lack of information on the reasons for the observed trends in the public interest. Future prospective studies are warranted to determine the reasons for the change in interest. Finally, although three experienced dermatologists have discussed and selected the search terms, some of the relevant dermatologic terms might not have been included in the analysis. The key strengths of this study are the analysis of a longer period comprising different stages of pandemic and comparison with the mean interest over the previous for years. Previous similar studies have compared either consecutive periods within a year^{12,14} or a relatively shorter period during the pandemic with only the previous year.¹¹ Another strength of our study is the comprehensive list of search terms representing a wide range of dermatologic symptoms, conditions, treatments, and procedures.

In conclusion, the study demonstrated a significant impact of the COVID-19 pandemic on the public interest in dermatology. The present results would help to create healthcare policies and information sources, which can meet the public demand. The reasons for the observed trends and their effect on patient outcomes might be of interest for future studies.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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