

I will never forget my first patient—a healthy sixteen-year-old athlete complaining of headaches and fatigue. He decided to seek medical care when he noticed changes on his body: his skin appeared yellow and tiny red dots covered his abdomen. While shaving, he felt lumps underneath his skin. He casually dismissed his other symptoms to stress, but the changes on his skin he could not explain.

My interest in skin diseases and the cutaneous manifestations of illness began with this first patient and his battle with acute lymphocytic leukemia. The petechial rash and impressive lymphadenopathy were just the beginning of the visible changes his body would endure. The cystic acne, hyperpigmented scars, patchy hair loss, and photosensitivity would serve as reminders of the ravages of the chemotherapy that would consume two years of his life.

His experiences fostered my interest in the toxic effects of chemotherapeutic agents on the skin. During college, I worked with a team at Northwestern University to help define the dermatological side effects of various medications. The insight I gained from my research led me to become involved with a publication discussing the poor quality of life of cancer survivors affected by skin changes. I became even more passionate about the field of dermatology as I saw how dermatological issues can profoundly affect the psyche of these strong patients—they are more prone to lose confidence in themselves and in their treatment when they suffer problems with their skin. I am most drawn to helping such patients.

During rotations in medical school, my attention centered on patients with dermatological conditions. It was refreshing to see how integral patients were in their own healing. Patients could vividly describe their own pathology, which removed an entire degree of separation between themselves and their medical team. We often relied on them as much as they did on us. Unlike with other specialties, dermatology affords us the chance to see how patients become witnesses to their own healing.

My interactions with such patients inspired me to establish a branch of the Sun Protection Outreach Teaching by Students (SPOTS) program in Illinois, an organization aimed at educating elementary school students about the dangers of sun exposure. I realized the importance of being active outside of the hospital and developing a platform to motivate and influence others. Through SPOTS, I helped to develop digital recordings of our school lectures in an effort to reach more at-risk youth. This sparked my interest in innovation. As an aspiring entrepreneur within the field of medicine, I recognized a path where I could build an even more well-rounded career. Consequently, I took time away from medical school to pursue an MBA. I gained a new set of skills: marketing, leadership, communication, and management. This new skill-set will provide a foundation for outreach to more communities and help strengthen my contribution to dermatology.

I will never forget my first patient. I will never forget looking in the mirror, examining my yellow skin and tiny red dots, and finally admitting to myself that I

needed help. Experiences are meant to change us. Having leukemia gave me perspective, my education gave me opportunities, and now patients give me a reason to pursue dermatology. Today I am just as fascinated and motivated to create change for my patients as the sixteen-year-old who wanted to see change in his own body. The difference is the simple fact that now I can envision myself creating that change as a dermatologist.