

Intergenerational Dermatology: Two Generations of Dermatologists Reflect on the Field

WITH HEIDI A. WALDORF, MD, AND DONALD S. WALDORF, MD, BY HEIDI SPLETE

>> Although many children follow their parents' paths to medical school, the specialty of dermatology seems to have distinctive family appeal. *Practical Dermatology* reached out to several parent/child dermatologists for some intergenerational perspective and reflections on the field. In this segment, father and daughter Donald S. Waldorf, MD, and Heidi A. Waldorf, MD, describe how sharing the rewards of practicing dermatology has enriched their relationship.

Practical Dermatology: What inspired you to pursue a career in dermatology?

Donald S. Waldorf, MD: I was inspired to pursue dermatology as a medical student at the University of Pennsylvania after attending lectures by the three dermatology giants who were teaching there at the time: Donald Pillsbury, Walter Shelley, and Albert Kligman. These physicians, individually and together, were leading a new wave of science and research in a specialty that was evolving from trial and error into the mainstream of medicine, and I wanted to get in on it.



Donald S. Waldorf, MD

PD: How much, if at all, did you encourage your daughter to pursue a medical career in general and dermatology in particular?

DSW: I was so happy practicing dermatology that I strongly encouraged Heidi from early childhood to pursue it as well. I felt that dermatology was a career that gave me great personal satisfaction and professional success, while leaving time for a personal life, and I thought a career in dermatology would do the same for her.

PD: What do you think are some of the greatest changes in dermatology since the time you began your career?

DSW: Dermatology as a specialty, as well as the practice of medicine in general, has changed dramatically in the 60-plus years since I started my residency. Nearly every dermatological disease is now treated differently and better than in the past, mostly due to fundamental changes in understanding

causes and then researching and discovering new pharmacological and surgical therapies.

Practice is also very different. Technological changes, as well as changes in payment methods, the death of solo practice, reimbursable treatment by non-doctors, the development of multiple subspecialties in dermatology, and corporate practice ownership all have altered patient-doctor relationships, some for the better, some for the worse. I think dermatology and medicine in general can still be a rewarding profession, but it is different today from the field I went into.

PD: Did you advise your daughter on any potential pitfalls of practicing dermatology? Have you offered advice as she has grown her career? Has she offered you advice on emerging technology and changes in practice management?

DSW: When I discussed dermatology as a career choice with Heidi, I discussed primarily what I saw as benefits. At that time, I may have looked through rose-colored glasses, but I saw only positives. The only pitfalls I saw were doing what it took to get admitted to medical school and securing a dermatology residency.

Heidi has managed her own career superbly. Her surgical training, her early interest in Mohs surgery, and her genius in cosmetic dermatology are far different from my primary interest in medical dermatology. The main advice I gave her was to join me in practice, something I'm grateful she did. Before my retirement, Heidi took over more and more of the practice management as I stepped away. She introduced lasers and a panoply of cosmetic instruments to the practice, eventually changing the practice totally to cosmetic dermatology when I retired.

PD: What do you enjoy most about having your daughter follow in your career footsteps?

DSW: Heidi following me into dermatology was the fulfillment of a dream and has been hugely satisfying, and I take great pride in her accomplishments. I treasured working with her and still enjoy the bond that dermatology has given us.

In 1995, Heidi A. Waldorf, MD, started her career, splitting

time between the faculty practice at Mount Sinai Hospital in New York City and partnership with her father in the private practice he founded in 1971. They worked together until his retirement in 2016. She left the university and relaunched the practice as Waldorf Dermatology Aesthetics. Dr. Waldorf gives her perspective on sharing both a career and an office, in an interview with Practical Dermatology.

PD: As a child, and as a teenager, what did you think about your father's job? How did that impact your decision to choose a medical career?

Heidi A. Waldorf, MD: The first line of my medical school application essay was "for me medicine is not a career choice, it is a life choice." That's how my dad practiced—he loved seeing patients, reading journals, and discussions with colleagues. He worked hard, including weekends seeing patients on Saturday and doing consults. In our community, people regularly thanked him for his care. I saw medicine providing a very satisfying and independent life.



Heidi A. Waldorf, MD

PD: Did you know on entering medical school that you wanted to pursue dermatology? Why or why not?

HAW: As long as I can remember, my dad "encouraged" me to pursue dermatology. As in, "Pass the potatoes, have I told you dermatology made me who I am today?" Based on his hard sell and the vivid photos on his journal covers, I said I'd never do dermatology. At Harvard, I majored in economics and was a research fellow at the John F. Kennedy School of Government. When I graduated in 1986, government and insurance companies started squeezing control from physicians. I planned a career in public policy, but genetics won out. As a medical student, I saw dermatology issues on every clinical rotation, often the lynchpin of diagnosis. I loved the procedures in general surgery, but not the environment. I joke that my dad put a tape with subliminal messaging in my childhood room, because my senior year American Dermatological Association student fellowship research topic was cutaneous T-cell lymphoma, the disease he studied at the NIH. And as the offspring of a dermatologist and an artist/lawyer, I'm visual, personable and have good hands, ideal for dermatology.

PD: What advice did your father give you about dermatology as a specialty?

HAW: Dad's only repeated advice was "be a dermatologist," but just by being his daughter, I learned the basics. In elementary school, I chose the skin for every human body project. In college, my final freshman expository writing paper was "Acne vulgaris, myths and realities," researched over a weekend using books in my dad's library and the nearby Avon research facility.

PD: What are some differences about your dermatology training/medical school experience compared to your father's experience?

HAW: Dad and I went to the same medical school, University of Pennsylvania, class of 1962 and 1990, respectively, followed by rigorous dermatology residency programs, dad at the University of Pennsylvania and New York University, and me at Harvard.

Our programs taught residents to think like dermatologists, not just memorize diseases. Dad's primary interest was always general dermatology, and he was an early adopter of innovative diagnostic tools and therapies throughout his career. For me, early exposure to fantastic dermatologic surgeons piqued my interest in procedures. Mohs with Stuart Salasche, Jessica Fuches and Suzanne Olbricht; and using Rox Anderson's prototype lasers with Suzanne Kilmer were highlights. My mentors Kenneth Arndt and Jeffrey Dover encouraged me to do a Mohs and laser fellowship with Roy Geronemus. The combination of medical and surgical training provided a foundation to grow into the cosmetic dermatologist I am today.

PD: How would you compare how you and your father interact with patients and manage administrative issues?

HAW: Generation and gender influence communication and administrative styles. In my dad's day, patients believed doctors know best, especially a confident male physician. My era is defined by documentation, regulation and patients who arrive with pages of their own research. When I began practice as young-looking woman, I had to walk the fine line between confident and aggressive. At the office, my dad made medical and financial decisions, but delegated administrative issues to others. I have always overseen all three areas; a combination of the increasing complexity of running a practice and my expectations as a woman. But our endpoint was the same: successful practices with long term staff (pre-pandemic) and decades-long patient relationships.

PD: What are some benefits (expected and unexpected) of having a parent in the same field?

HAW: It allowed me to recognize that dermatology was a good fit. As business partners, my dad and I could trust each other medically and financially. Dermatology also has become our favorite topic of conversation. For example, while in Patagonia last winter, I woke up with a swollen lip. I sent Dad photos and history. We texted back and forth and concluded the cause was native tea leaves. Another bonus: I can laser his occasional lentigines, yet I have none to treat because he made tanning a cardinal sin in our house. ■