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Faculty Spotlight: Aliya Hines, MD, PhD, MS, FAAD

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Residency Times: Where did you grow up? When did you first become interested in science or medicine as a career?

Aliya Hines: I grew up in a college town (technically a village) in southwestern Ohio, Yellow Springs. Antioch College always attracted diverse, free-thinking, creative students and faculty, so kids growing up in the surrounding village were encouraged to be independent thinkers and allowed to roam free. It was a great place to grow up.

I loved art and creative writing in high school and thought I would pursue a creative career. In my junior year, I took AP Chemistry with an excellent teacher, Judy Duke, who made me appreciate the connections between art and chemistry and made chemistry fun. That was the beginning of my interest in science, and I ultimately became a chemistry major in college. Despite having several physicians in my family, I didn't seriously consider medicine as a career until much later.

RT: What was the focus of your doctoral research?

AH: After college, I started a PhD in Pharmacology at the Johns Hopkins School of Medicine. My research used targeted, small molecule kinase inhibitors (which at that point were still only being used for research purposes) to better understand the chemical mechanism used by protein kinases to transfer phosphate groups from ATP to their protein targets. In the second year of my PhD, imatinib became the first targeted kinase inhibitor approved for clinical use in the US, and I became more interested in ways I could apply my doctoral research to clinical practice. My PhD advisor was an MD/PhD, and as my interests evolved, he encouraged me to apply to the MD/PhD program. I took his advice, applied to medical school, and ended up taking a leave of absence at the end of my second year of my PhD to start medical school.

I did one year of medical school, then went back to the lab and finished up my PhD before finishing the last three years of medical school. I graduated with both degrees in 2007.

RT: Why did you choose dermatology as your specialty?

AH: In my 3rd year clerkships, I loved the intellectual challenge of diagnosis in internal medicine, the beautiful visual images in pathology and using my hands in surgery. Dermatology allowed me to do all of those things in one specialty. I also could envision how kinase inhibitors might eventually be used in dermatology and thought I would be able to build a translational research program in that area.

RT: Does your doctoral research inform your clinical practice and mentoring of residents?

AH: Over the years, I have lectured to our residents about emerging uses for targeted kinase inhibitors in dermatology and have been excited to see them emerge as transformative medications for difficult to treat conditions like alopecia areata and vitiligo. I transitioned from basic science to health services research several years ago, but kinase inhibitors will always be near and dear to my heart.

RT: What are some differences you've observed between the Baltimore and Detroit patient populations?

AH: Both cities have large, urban, predominately African-American patient populations that have been historically underserved. When I was training in Baltimore, there still was a large population of patients who had untreated or poorly treated HIV, so I saw some very rare AIDS-associated skin diseases like cutaneous cryptococcus which I have not seen since. We also saw a lot of Kaposi sarcoma, which very few of my residents have ever seen in person now. One difference between Baltimore and Detroit is that the Baltimore Ravens won the Super Bowl while I was in medical school; I'm still waiting on the Lions to do that here in Detroit.

RT: I understand you recently completed a fellowship in telemedicine.

AH: I started practicing teledermatology through the VA in 2016 and was impressed with how the VA's teledermatology program allowed us to provide specialty care to rural veterans who would not otherwise have access to a dermatologist. It seemed so obviously beneficial, and yet private insurers and Medicare/Medicaid were not widely reimbursing telemedicine services at that time. In an effort to better understand the insurance policies around telemedicine and expand on the evidence of the clinical benefit of teledermatology, I started a two-year health services research fellowship with the National Clinician Scholars Program at the University of Michigan in 2018. I was finishing up my fellowship in 2020 when the pandemic started, so telemedicine use exploded and suddenly telemedicine research was a hot topic. I was able to [publish some interesting work](#) around youth and their acceptance of telemedicine, and I am currently looking at how the pandemic impacted the use of teledermatology to diagnose skin cancer at the VA. It has been really rewarding over the past two years to see patients and providers begin to appreciate the value of telemedicine and to see it become integrated into health care workflows.

RT: What was the last great nonmedical book you read? Is there one that all residents should read?

AH: I love the work of Gabriel García Márquez and I'm currently reading *Autumn of the Patriarch*, which like all of his novels is just breathtakingly beautiful. I wish my Spanish were better so that I could read his novels in their original language and fully appreciate his prose.

The book all residents should read is *Ikigai: The Japanese Secret to a Long and Happy Life*. The life of a physician is full of pressures and responsibilities, and it is easy to get overwhelmed and burned out. Having a clear understanding of your purpose is key to putting all those pressures in perspective and being able to focus on why you are really doing what you are doing. *Ikigai* is a nice, short introduction on how to find your "why" that even a resident can find time to read.

My yoga practice is key to my well-being. I try to squeeze in at least 30 minutes each day, and a full hour on the weekends. I was very inflexible when I started, but after a year I finally was able to achieve a full backbend (wheel pose). Being able to do that gave me the confidence to try other things beyond yoga that I once thought were impossible – like getting my 14-year-old to clean his room 😊