



ISD *Connection*

The Official Newsletter of the International Society of Dermatology

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ISD Member Dr. Amit Pandya Committed to Community Service



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FROM THE PRESIDENT

XII ICD IN WOW-WONDERFUL ARGENTINA

Greetings of peace and love!

As your ISD President, it is my obligation to oversee all the undertakings of the Society, from leading the Executive Committee meetings and advising the standing committees to personally inviting dermatologists to join our ISD. I listen and act. As your Ambassadors, I represent our Society around the world and promote our regional meetings to the best of my ability. I may wear many hats, at times all together, but these I do with much willingness -- all to ensure the continuous growth of our beloved ISD.

The upcoming XII International Congress of Dermatology (ICD) to be held in Argentina come April 18-22, 2017, is one hat I am ever proud to wear. As I trust this Congress to be a very formidable and



a very well organized event, I strongly encourage everyone to come and be part of this exciting Congress.

The 2017 ICD theme "*The Big Challenge: Precision Medicine*" lives to be truly a challenge. Tedious preparations are ongoing in beautiful Buenos Aires, gathering top-caliber speakers to engage with in-depth discussions of various dermatological concerns and issues. Keynote speaker Dr. Steve Katz and a "DreamTeam" of plenary speakers have been lined up to include Profs. Jean Bologna, Ervin Epstein, Giampiero Girolomoni, Roderick Hay, Francisco Kerdel, James Krueger, Teri Manolio, John McGrath, Darrell Rigel, and Hensin Tsao, all of whom are highly respected dermatologists in their fields of expertise. The scientific committee, with Prof. Jorge Ocampo-Candiani at the helm, has organized 54 symposia, oral presentations and sister society meetings. How they will fit all these academic and technology updates in just five days is a wonder in itself!

Make time to explore Argentina, which boasts of many natural wonders including Iguazu falls, Los Glaciares National Park and the Seven Colors Hills. But whether one is inclined for the arts, palaces, museums, theatres, or its rich history, the Tango show should not be missed! Discover for yourself why Buenos Aires is called the Tango City!

Come and join us. Plan to attend the XII ICD and see what Argentina has to offer. It is another opportunity to learn and have an adventure of a lifetime. Simply wonderful!

MABUHAY!

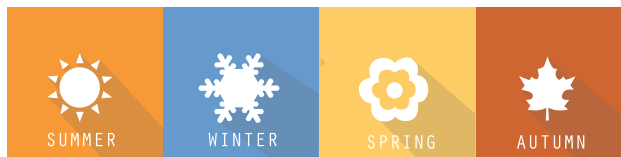
Evangelina B. Handog, MD
ISD President



Congress President Prof. Ricardo Galimberti with ISD President Dr. Evangelina Handog

Join the Discussion on Climate Change

The ISD Climate Change Committee is pleased to invite all ISD members to join the new "Discussion Forum on Climate Change and Skin Disease" on the ISD homepage. The discussion forum will serve as a valuable and interactive resource for ISD members globally to post their knowledge and insights on the topic of climate change and skin disease. Another great way ISD members can stay connected!



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FROM THE SECRETARY-GENERAL

My Dear Friends and Esteemed Colleagues,

The last quarter of the year is rapidly approaching, so, it is natural to reflect on the numerous activities our Society has been engaged in, to date. Let's look over and check our "to do" list for the year 2016. Together, we worked hard to make this year one of the most productive ones in terms of increasing membership, fostering volunteerism and advocacy, encouraging participation in the regional and national meetings. The overwhelming success of the ISD Continental Congress in Dubai -- the highlight of the year -- was due to the tireless work of the Executive Board, the entire leadership of the Society in cooperation with the Scientific Committee, and, of course, the inspirational vision of Dr. Hassan Galadari, placing Dubai Derma on the global stage.



ISD members have actively participated in a number of dermatological meetings around the world by proudly representing our Society in Colombia, Iran, Sri Lanka, Cuba, Ethiopia, India, and Nigeria. In every *ISD Connection* newsletter, you can find exciting reports and get a glimpse into the breadth of our contribution to the world of dermatology. I would like to underscore the ISD vision of extending our mission to all corners of the world by bringing together dermatologists, researchers and educators to share up-to-date knowledge and expertise.

What is even more remarkable is that we learn to understand each other, accept our differences, build bridges and make new friends at social gatherings, sightseeing tours and networking receptions. Through these, we expand our own network of colleagues who we can call on for a professional opinion from time or time or plan a tête à tête at an upcoming meeting. Suddenly, the vastness of the world becomes a little less so when we can reach out and connect to anyone, anywhere, anytime -- all thanks to the connections we have made through the ISD.

I would like to thank you, our members -- our goodwill ambassadors -- for your engagement in community-based projects, volunteerism, and advocacy for improving access to dermatological care around the world. I invite all of you, my friends and colleagues, to join in discussions and share your thoughts, your aspirations and New Year's resolutions, so, together we can extend the International Society of Dermatology camaraderie, even more!

I am looking forward to seeing each and everyone of you at our future meeting.

Yours truly,

Nellie Konnikov, M.D.

Nellie Konnikov, MD
ISD Secretary-General

Dermatologist Inspired to Start Hair Clinic in Nigeria, Thanks to ISD Mentorship Experience

The warmth and friendliness of the people of Miami, Florida, made a great first impression on ISD mentorship awardee Dr. Ilesanmi Omotoyosi, who traveled from Nigeria to the United States for the first time, for a month-long mentorship in August 2016. Paired with mentor Dr. Antonella Tosti in the Department of Dermatology and Cutaneous Surgery at the Miller School of Medicine, University of Miami, Dr. Omotoyosi was inspired by Dr. Tosti's incredible insight, balanced perspectives and innovative strategies in dealing with hair and nail disorders.

She noted that the hair clinic was quite busy and patients presented with several forms of alopecia, including scarring alopecia and frontal fibrosing alopecia that involved the frontal hair and eyebrows. Dr. Omotoyosi noted that traction alopecia was quite common, especially in afro-textured hair due to improper hair care practices.



Dr. Ilesanmi Omotoyosi (left) with mentor Dr. Antonella Tosti (right)

Intrigued by the hair problems seen in African-Americans, Dr. Omotoyosi intends to implement knowledge and skills acquired in her rotation to further improve the management of hair disorders for this population. Specifically, her top priority is to create an awareness program on hair grooming and start a hair clinic for diagnosis and treatment of hair disorders in afro-textured hair upon her return to Nigeria.

Nail disorders (i.e., nail psoriasis, onychomycosis, periungual warts, melanonychia) were quite commonly seen during her rotation. Dr. Omotoyosi saw the effectiveness of bilateral nail matrix destruction with phenolization for an ingrown toenail.

In addition, Dr. Omotoyosi thoroughly enjoyed being part of a broader mentoring network, which included rotations under Dr. Martin Zaiac and Dr. Francisco Kerdel at Mt. Sinai Hospital in Miami. She noted that both shared their wisdom in several aspects of dermatology, including cosmetic and general dermatology.

Dr. Omotoyosi is grateful to the ISD Mentorship Committee for this tremendous experience and also to her three mentors for their expert knowledge and skills they shared with her.

"Being mentored by these hugely experienced dermatologists was a great privilege and incredibly enriching. I am honored to have been included in the mentoring program and look forward to continuing my relationship with the alumni network!"

-- Dr. Ilesanmi Omotoyosi

Argentina Promises Full Plate of Education, Culture and Activities as Host of XII ICD

From April 18 - 22, 2017, Buenos Aires, Argentina, will host one of the most important international congresses of 2017 -- the XII International Congress of Dermatology (ICD).

The scientific committee, constituted by salient representatives of different dermatological areas, has gathered a group of astounding dermatology scientists in the plenary lectures. They will discuss very significant issues on global dermatology.

An Unmatched Scientific Program

The objective of XII ICD is to discuss precision medicine: the new knowledge acquired through genetics and molecular biology. The XII ICD will present how new discoveries in molecular biology and genetics are changing known ways of producing drugs, diagnosing diseases, treating patients and saving lives. This theme will unfold in a series of plenaries and sessions such as “The Molecular Diagnosis of Melanoma” and “Pharmacogenomics”. Please visit the XII ICD web page at www.icd2017.com.ar/scientific-info.html to see the complete lineup of different topics.

The XII ICD will also devote several panels discussing the cutting-edge innovations in skin cancer, laser dermatology, psoriasis, aesthetics and hair. A few of the many sessions will focus on hidradenitis suppurativa, autoinflammatory and autoimmune/connective tissue diseases, mycobacterial disease and sexually transmitted disease, oncology, and Moh's surgeries. Interesting topics will also cover “Laser - dermato-aesthetic therapies”, “Botulinum Toxin - a smooth natural face”, “Cosmetic - new emerging biotechnologies”, and “Aging and skin - impossible to avoid, possible to prevent”.

Plenary Lectures

“Psoriasis” – James Krueger

“Pharmacogenomics” – Teri Manolio

“Genetic disease and correcting genetic disease”
– John McGrath

“Oncology Surgery” – Darrell Rigel

“Molecular Genetics of Melanoma” – Hensin Tsao

“New therapies in melanoma – what every dermatologist should know” – Jean Bologna

“Pathophysiology of BCC and development of small molecules for the treatment of BCC” – Ervin Epstein

“Atopic Dermatitis” – Gianpiero Girolomoni

“Fungal disease - still a global challenge” – Roderick Hay

“Molecular dermatology: Progress and Promise”
– Stephen Katz

“Hidradenitis Suppurativa - Still a challenge, is there something new?” – Francisco Kerdel

These sessions (and many others) are intended to stimulate scientific debate and discussion of the benefits and the risk of novel discoveries. Many widely recognized dermatologists will lecture in these sessions.

The inauguration of the XII ICD -- covered by the registration fee -- will be hosted at the “Usina del Arte.” The Usina del Arte was built in 1914 as the headquarters of the Italo Argentina de Electricidad in the neighborhood of La Boca. Reminiscent of a Florentine Palace, it was restored as an auditorium, theatre and museum.

Endless Adventures Await in Buenos Aires

Buenos Aires is a city that displays diverse features: very near La Boca, you can find La Recoleta, with its history and elegant shops, and Puerto Madero, a recently recycled neighborhood. Buenos Aires will offer nightly shows, gastronomy, museums, theatre, cinemas, libraries, bookstores, coffee shops, gardens and the possibility of flying anywhere else: an opening door to Argentina.



Buenos Aires



Viñedos

Indeed, the XII ICD is an opportunity to get to know Argentina. Southern Argentina displays the silence of the glaciers and the Patagonia. In the Golfo Argentino you may encounter, sometimes, exponents of the Argentine whale. Ascending through the Cordillera de los Andes, you will see towns and cities that -- through the colors of autumn -- prepare themselves to ski season.

Following the vineyards, you will arrive to the Puna and to Argentine summits. Northern Argentina is home to la Quebrada de Humahuaca and the Impenetrable. Further east, surrounded by tierra colorada, you will listen to the rhythm of the Iguazú Falls, and driving south through the Mesopotamia you will grasp the watery landscapes close to the Paraná river.

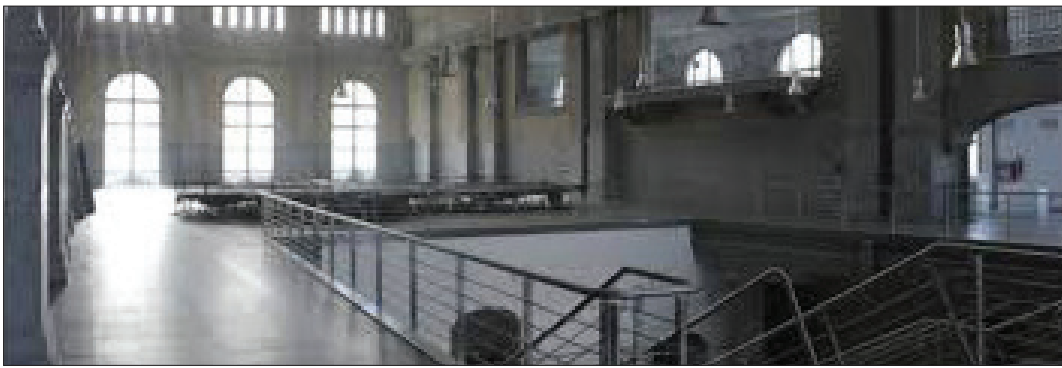
Should you have any questions, please send an email to *ricardo.galimberti@gmail.com*.

Follow us at our web page: www.icd2017.com.ar.

Report submitted by Dr. Ricardo Galimberti



Cataratas



Usina del Arte

Book a Tour, Discover the Wonders of Argentina

For those seeking a true adventure, several exciting tours are available for attendees and their guests to participate in while attending the meeting.

Imagine trekking to “the end of the world”, to the breathtaking island of Ushuaia, where the natural wonder and beauty of the landscapes abound. Or a jaunt to El Calafate to tour the nearby famous Perito Moreno Glacier -- considered one of the greater natural spectacles of South America -- which will provide a most memorable tourist experience.



Tours span multiple days and include travel and accommodations. English-speaking guides will accompany travelers.

For more information on the available tours, visit the meeting website at www.icd2017.com.ar/accommodation-travel.html.





ISD Member Serves Community While Inspiring Young Medical Students to Give Back

For 33 years, the Agape (which means altruistic love in Greek) Clinic in Dallas, Texas (USA), has been serving individuals in the local community who cannot afford general medical care. When ISD member and then University of Texas Southwestern resident Dr. Carrie Kovarik started a dermatology clinic in the Agape Clinic in 2002, ISD member Dr. Amit Pandya began working at the clinic and has been instrumental



Dr. Amit Pandya

in expanding services by gaining support from dermatology residents and faculty willing to volunteer to serve those less fortunate. Dr. Pandya shares how the dermatology clinic has grown over the past 14 years with the unwavering support of the local dermatologic community.

Describe the need for the Agape Clinic in Dallas.

The reason we started this dermatology clinic is because we saw a need and felt we could help fill this need. There are so many unfortunate, underserved individuals in the Dallas-Ft. Worth area who do not have adequate funds or insurance for health care. These individuals suffer with various conditions and often have nowhere to turn. They live among us and are part of our community. As dermatologists, we have been given special knowledge through our education. I believe this is a gift which allows us to diagnose and treat a variety of skin disorders. However, with this gift comes great responsibility to heal and treat others to relieve their suffering. The Agape Clinic allows us to do that in a convenient way. Most of us volunteer once every 1-2 months, providing a 4-hour dermatology

clinic every Saturday with one dermatology faculty member, one dermatology resident, four medical students, two college students and two translators/helpers.

How many local residents utilize the free clinic every week? Every year? What qualifies a person for treatment?

We see about 15-20 dermatology patients every week and approximately 750 dermatology patients every year at the clinic -- and the number of patients is increasing every year. Fortunately, the generous citizens of Dallas recently donated enough money to the Agape Clinic for it to purchase a two-story building across the street from the original clinic. The leaders of the clinic generously allocated a dedicated area just for dermatology in this new clinic. Now we have a large, modern dermatology clinic with five exam rooms, including a procedure room, as well as a supply/microscope room, bathroom and large waiting room.

We treat patients of all ages in the clinic. The only qualification to come to the clinic is the presence of a skin, hair or nail problem for which the patient seeks evaluation and treatment. We ask patients to give a small donation to help run the clinic, but this is not a requirement and many patients cannot afford to make a donation and are seen for no charge.

What are some of the most common dermatologic conditions you treat?

Since our area has a large Latino population, a majority of our patients are Latino -- many of whom fall below the poverty level. We also see refugees from wars and other conflicts from around the world. Common diagnoses are bacterial, fungal and viral infections, contact dermatitis, atopic dermatitis, psoriasis, warts, pigmentary disorders, hair loss, papulosquamous disorders, non-melanoma skin cancers, pigmented lesions and ingrown nails.

What type of treatments do you typically provide?

We have some medications which we can donate to the patient, otherwise we write a prescription and the patient buys their medications at a low-cost pharmacy, often for only a few dollars. We offer skin biopsies for diagnostic purposes and are extremely blessed to have the services of Dr. Clay Cockerell who has provided free skin biopsy processing and diagnostic evaluation for our patients for



Volunteer faculty, residents, medical students, college and high school students and staff

14 years. We are also able to order blood and urine tests as well as cultures, which are performed for no charge by a local laboratory. We are able to perform minor surgical procedures, thanks to donations of instruments and a hyfrecator by our local dermatology society members. These colleagues have supported the Agape Clinic consistently since we started, donating funds, samples and supplies every year. It is great to work in a dermatology community that has such supportive members.

You give freely of your time and expertise to operate this clinic that helps so many people in your community. How fulfilling is this to you personally?

This clinic has been a blessing to me and my family in so many ways. It reminds me that I live in relative luxury compared to most of the world. It helps me and my family appreciate all that we have. Working in free clinics and medical mission trips in other countries have been some of the best teaching experiences I have given to my sons. As a doctor, I struggled with the lure of materialism towards my children as they were growing up. These experiences helped them keep their priorities straight and turn them into the compassionate men they are today, for which I am very thankful.

Another important aspect of the Agape Clinic is how it inspires first year medical students to consider dermatology as a career, especially those who are charity-minded but never considered dermatology as a specialty in which they could serve the poor. Many individuals are dermatologists today because of a spark that was struck in the Agape Clinic. Some of these individuals are now faculty members in my department who serve the Agape Clinic today.

What advice would you give to your fellow ISD members who may be considering similar volunteer work in their communities?

Look around you and you will likely see a need for your services. Start to investigate the need and find like-minded people around you who are looking to serve. In this world, there are millions of people who want to lord over others but very few who are willing to serve others. When you find these few individuals, be their friend

and learn from them. Join them and together you can accomplish so much more. The Agape Clinic works in our community but charity care may have to be done differently in other cities, perhaps through a government, community or religious organization.

We are performing an epidemiologic study of all patients coming to the Agape Clinic over one year and hope to publish this next year to provide a template so that anyone can start a similar clinic in their community. It is our hope that the good work performed at the Agape Clinic can be duplicated and multiplied throughout the United States and the world.



Dr. Pandya examining a patient with Dr. Shadi Kourosh



Patients waiting to be seen at the Agape Clinic



The medication room at the Agape Clinic

10th “Maria M. Durán” Update Course of Dermatology ISD Regional Meeting Held in Cali, Colombia

Dermatologists from around the world gathered in Cali, Colombia, September 1-3, 2016, for the 10th “Maria M. Durán” Update Course of Dermatology ISD Regional Meeting. For the past 16 years, this highly successful meeting, sponsored by the International Society of Dermatology, was named after the demise of Dr. Maria M. Durán at the early age of 52. Dr. Durán was former Secretary-General and Executive Vice President of the ISD, who devoted her time in spreading the word about the ISD and organizing ISD Regional Meetings around the world. Today, the ISD awards the Maria M. Durán Medal to women leaders in dermatology and dermatologists who have made significant contributions to dermatologic conditions affecting women and children.

This 10th meeting was graced by the presence of important professors in international dermatology, invited as speakers: Prof. Khaled Ezzedine (Hôpital Mondor, Paris, France), Dr. Maria Hordinsky (Chair, Department of Dermatology, Minneapolis, MN, USA), Dr. Omar Sanguenza (Chief Dermatopathology, Wake Forest University, Winston Salem, NC, USA), Dr. Francisco Bravo (Hospital and Universidad Cayetano Heredia, Lima, Peru), Dr. Caio C. Castro (Pontificia Universidad Católica do Paraná, Curitiba, Brazil), Dr. Carola Durán (Instituto Nacional de Pediatría, México City, México), Dr. Felipe Jaramillo (Chair of Dermatology, Universidad de Caldas, Manizales, Colombia), and Dr. Eduardo Fierro (Oncoderma, Cali, Colombia). This regional meeting gathered 240 dermatologists who enjoyed high-level lectures in a variety of topics.

Prof. Ezzedine explained how vitiligo, a genetic predisposition leads to an early CD8 cell infiltrate within affected vitiligo lesions that would start the detachment of melanocytes but not their destruction. Later on, other molecules associated with this damage, could originate a cascade of signals involving cytokines, receptors and other pro-inflammatory systems such as WNT signalling which would initiate melanocyte damage leading to depigmentation. Management-wise, children may respond to phototherapy, excimer laser, topical corticosteroids, 0.1% tacrolimus under occlusion and combination therapies. Prof. Ezzedine also mentioned that follicular vitiligo, leukoderma punctata, hypochromic or mixed vitiligo and migratory poliosis may be other types of vitiligo but are awaiting to be classified in the future.

Dr. Maria Hordinsky discussed recent advances on the pathogenesis and therapy of alopecia. With some patients' complaint of burning on the affected sites, studies reveal that increased neuropeptides are associated with areas of hair loss, suggesting that these changes could possibly be reversed with gabapentin or pregabalin. Alopecia in rheumatoid arthritis, diabetes and celiac disease could be related with associated genes. Promising effects with ruxolitinib and low intensity red laser have also been reported. In cicatricial alopecia, the type of inflammatory cell infiltrates contribute to define the diagnosis. Treatment should include anti-inflammatory, regrowth and combination drugs. The participation of the microbiome in these types of alopecia was suggested. Finally, Dr. Hordinsky mentioned the effect of emerging therapies, such as tofacitinib, with significant improvement in alopecia areata.

Dr. Omar Sanguenza discussed different tools for identification of melanoma -- as simple as H&E stain, sophisticated techniques as CGH that reveal affected genes, or the FISH method which allows differentiation between Spitz nevus and Spitzoid melanoma. He also discussed the significance of BRAF and PD4 in melanoma. Regarding newer findings in inflammatory dermatoses, he pointed out that Sweet syndrome may present in the tongue as cryptococcosis, and PLEVA with oral ulceration in children and adults associated with parvovirus may have a fatal outcome. Differentiation of polymorphic light eruption from lupus may be done by typhification of lymphocytes. Finally, Dr. Sanguenza reminded the audience that clinicians should not ignore necrotic ulcers provoked by cocaine abuse.

Dr. Carola Durán discussed pigmentary mosaicism emphasizing clinical forms and diagnostic methods. Melanosis of Ito, a classic mosaicism, does not correspond to a syndrome but to a sign, having several cell lines genetically affected. Dr. Durán also discussed evaluation and treatment of vascular malformations by a multi-disciplinary group. These lesions may be associated with low or high flow according to the type of affected capillaries, arterioles or mixed vessels. Abnormal vascular structures are treated with sclerotherapy, arterial embolization, external compression or dye lasers according to the vascular alteration. The vascular radiologist is an important team component for the management of these lesions. In addition, Dr. Durán illustrated, with numerous photographs, the main characteristics of the battered child syndrome, a very important differential diagnosis in certain patients that may have spontaneous ecchymosis or bleeding with minor trauma that may be present without child abuse.

Dr. Francisco Bravo discussed acral melanoma as a very important issue in Asia and Mexico, and also in black and Latino skin in the U.S., Colombia and Perú. It is not infrequent to observe melanoma in advanced stages. This tumor is rarely associated with a pre-existing nevus but it may be related to continuous trauma, a factor particularly observed in acral melanoma. Pigmented lesions on the soles larger than 7 mm should be considered as melanoma. Dr. Bravo also illustrated multiple clinical presentations of leishmaniasis simulating a variety of dermatoses that could only be diagnosed with pathological analysis, emphasizing on the diverse clinical manifestations such as nodular, lymphangitic, eczematoid, sporotrichoid, verrucous, recurring, diffuse (anergic) and associated with HIV. A granuloma caused by a free-life entamoeba (*Balamuthia mandrillaris*) is a serious disease reaching the brain via the nostrils after immersion in contaminated waters, for which miltefosine has



From left to right: Dr. Rafael Falabella, Dr. Maria Hordinsky, Prof. Khaled Ezzedine, Dr. Maria I. Barona, Dr. Francisco Bravo, Dr. Carola Durán and Dr. Jairo Victoria

been reported as a useful treatment. Gnathostomiasis may also be caused by ingestion of river fish; strongyloidiasis may provoke disseminated purpura and cysticercosis may present as epidermal cysts. Different clinical skin presentations of worms diagnosed by dermatopathology were also shown.

Dr. Caio C. Castro presented data comparing the clinical guidelines from the AAD and Spain for biologics in psoriasis. The decision for initiating biologic therapy should be based upon predictive factors and their action targets, among others. Dr. Castro emphasized that in patients with small plaque MF, 10% may evolve into lymphoma. In those with large plaque MF, up to 35% may have a similar outcome. As to vitiligo treatment, he mentioned that alfa-melanotide in combination with NB-UVB for four months has been reported very effective in non-segmental vitiligo. Topical tofacitinib and ruxolitinib have raised great interest and will be available in the near future. Methotrexate is another alternative that may be useful in select patients. Other molecules under study for vitiligo are abatacept, atorvastatin and ruxolitinib.

Dr. Felipe Jaramillo discussed cutaneous manifestations of renal disease. He showed excellent clinical illustrations with corresponding dermatopathology findings of calcinosis, porphyria, protoporphyria, fibrogenic dermopathy, numerous excoriations due to pruritus, uremic frost, macular amyloidosis and Kyrle's disease, among others. He also presented an update on porokeratosis.

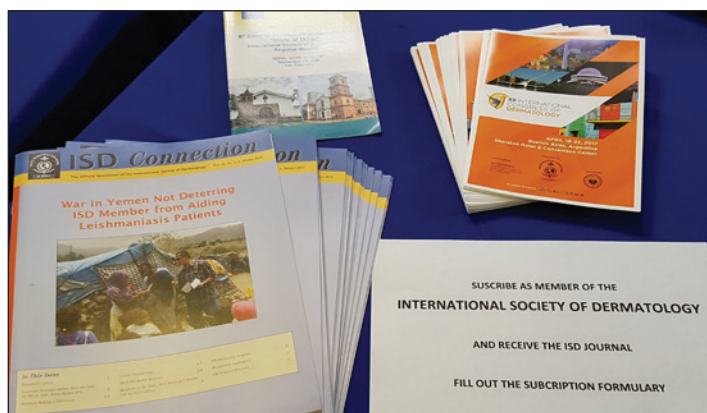
Finally, Dr. Eduardo Fierro presented an interesting lecture on non-surgical treatment of skin cancer by using cryosurgery in some patients for palliation, radiotherapy in others, and the newer immunotherapy cancer drugs ipilimumab and nivolumab for melanoma. For targeted therapies, vemurafenib or dabrafenib can be used as they target common genetic mutations (namely BRAFV600

found in a subset of melanoma patients). Vismodegib for basal cell carcinoma is a new drug that targets the hedgehog signaling pathways in cells halting the progression of this tumor during prolonged periods of time.

The audience was highly satisfied with the top-level lectures during the 10th "Maria M. Durán" ISD Regional Meeting 2016 in which only dermatological conditions were discussed, with newer concepts in pathogenesis, unusual clinical presentations of diverse dermatoses and a most interesting approach for therapeutic interventions.

We are indebted to the International Society of Dermatology for sponsoring the 10th "Maria M. Durán" ISD Regional Meeting 2016.

Report submitted by Dr. Rafael Falabella



Printed materials promoting ISD available at registration



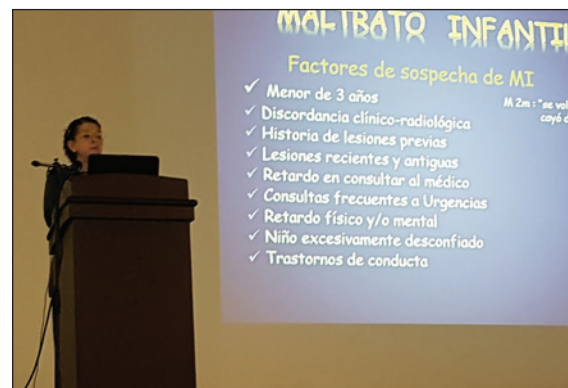
From left to right: Dr. Carola Durán, Prof. Khaled Ezzedine, and Dr. Maria Hordinsky



Attendees gather at the registration



From left to right: Dr. Francisco Bravo, Dr. Rafael Falabella, Prof. Khaled Ezzedine, Dr. Jairo Victoria and Dr. Omar Sanguenza



Dr. Carola Durán lecturing on child abuse

ISD-Sponsored Regional Meeting in Ethiopia Features World-Class Lectures and Local Grandeur

ISD members and dermatologists from around the world gathered in Addis Ababa, Ethiopia, for the 4th Annual Ethiopian Dermatology and Venereology Society (EDVS) Conference held in July 2016. This ISD-sponsored regional meeting was hosted by EDVS President Prof. Dagnachew Shibeshi and Acting Secretary Dr. Tizita Yosef. This meeting linked three Medical University of Warsaw trained dermatology professors, EDVS President Dagnachew Shibeshi and visiting professors Katarzyna Wozniak and Cezary Kowalewski. Professors Shibeshi and Kowalewski worked in the dermatology clinic at the same time and shared warm reminiscences about life there and in Warsaw in the 1980s.

ISD Directors Jacek C. Szepietowski and Robert A. Schwartz awarded five scholarships, based on individual performance in residency programs, to Drs. Messay Tesfaye, Bezawit Lakew, Bezawit Sinishaw, Mikias Woldemleak, and Elias Mulatu.

With the theme *“Improved availability of dermatologic medicines improves the quality of dermatologic care,”* there was a wide variety of insightful lectures. Fuad Teman linked the availability of dermatology medications to the quality of dermatologic care. A timely panel discussion on health insurance was then led by Wolderufael Alemayehu. EDVS President Shibeshi stressed rational use of topical steroids. As Prof. Szepietowski highlighted itch in

common dermatoses, EDVS President Shibeshi stressed on the rational use of topical steroids. With this, Katarzyna Wozniak emphasized clobetasol propionate 0.05% cream on the entire body as first-line monotherapy for bullous pemphigoid. Cezary Kowalewski evinced novel therapies for epidermolysis bullosa while Temam Kedir discussed the Gorlin syndrome. Elias Mulatu observed that lichen planus may be first evident as an erythroderma. Workalemahu Alemu recalled the association multiple piloleiomyomas and renal cancer in the Reed syndrome. At the end of the session, Prof. Schwartz gave a wonderful presentation on the dermatologic contributions of Polish pathology professor Maria Dabska, the only woman for whom a cancer is named. Also, Dr. Amel Beshir was congratulated upon her election as incoming EDVS President.

In addition to these presentations, the EDVS also sponsored a full day of continuing professional development lectures and pre- and post-conference lectures provided by the visiting professors for the dermatology residents and faculty.

Some attendees toured northern Ethiopia, viewing Bahir Dar with its nearby Blue Nile Waterfalls, the extraordinary churches of Lalibela, and the incredible palaces and castles of Gondar.

Report submitted by Professors Robert A. Schwartz and Jacek C. Szepietowski



From left to right: Prof. Jacek Szepietowski, ISD Scholarship awardees Drs. Messay Tesfaye, Bezawit Lakew, Bezawit Sinishaw, Mikias Woldemleak and Elias Mulatu, and Prof. Robert Schwartz.



From left to right: Special guests honored were Omer Ali Kombali, Jacek C. Szepietowski, Kasia Wozniak, Robert A. Schwartz, Cezary Kowalewski, and Mamoun Osman.



Professors Schwartz and Szepletowski with colleagues Mamoun Osman, Omer Ali Kombali and Tizita Yosef at Addis Ababa University College of Health Sciences.



EDVS President Professor Dagnachew Shibeshi (center) showing Robert A. Schwartz (left) and Jacek C. Szepletowski (right) around dermatology residency training facility.



The famous 12th Century Church of St. George, Lalibela visited by Robert A. Schwartz and Jacek C. Szepletowski.



Professors Szepletowski and Schwartz tout the many benefits of ISD membership.



The superb organizational efforts of EDVS Acting Secretary Tizita Yosef recognized by Robert A. Schwartz.



ISD Member Gives Hope and Healing to EB Patients in Mexico

An interview with ISD Member Dr. Julio Salas (Mexico) who started DEBRA Mexico, a branch of the international DEBRA organization of EB support groups, to provide medical services to EB patients and emotional support to help enhance their overall quality of life. Dr. Salas' EB program is the recipient of the Galderma Skinpact Award 2016 in the Community Leadership Category, Community's Vote, which was awarded in October 2016.

What was the main factor in your decision to start DEBRA Mexico to treat epidermolysisbullosa (EB) patients and operate a free clinic?

In 1993 when I spent some time at St. Johns Institute of Dermatology in London, I met my mentor, Prof. John McGrath, from whom I learned a lot about EB. So when I returned to Mexico, I decided to collaborate with his team in doing research on EB.

My decision to start DEBRA Mexico was mainly to address the pain, the suffering and all the needs of people living with EB, as well as the lack of knowledge of the disease in the medical area and in the general population.

Can you describe the work of DEBRA Mexico and how the center has grown since its establishment?

DEBRA Mexico -- as with all the DEBRAs around the world -- provides support to EB patients and their families. Our mission is to be one of the best non-governmental organizations to give the best support and treatment for EB patients.

We started in a small room in my office in 1994, seeing around one or two families per month in the beginning. During our first EB meeting in 1994, we served five EB families and had several volunteers. Now, we are seeing around 7-10 EB families per month, and our Mexican EB Registry has more than 430 families throughout the country.

In 2012, we opened the DEBRA Mexico House that offers free accommodations (12 beds) for EB patients and their families. In this 200 square meter building, we have offices for dermatology, nutrition, psychology, rehabilitation and dental services.



Dr. Julio Salas with a young EB patient

How is DEBRA Mexico funded and do you rely on volunteers to treat EB patients at your clinic?

There is no government funding for medical visits for EB patients in Mexico. DEBRA Mexico was started without money, as we worked at my clinic for several years until we raised enough money to rent a house for DEBRA Mexico in 2006. We have volunteers who spend time trying to get financial support for DEBRA. We organize raffles, bingos, car races, golf tournaments, 5km and 10km runs, art auctions and other events. Some Mexican companies have been supporting DEBRA Mexico since 2010, but every year we face some problems raising enough money.

On average, how many new patients are referred to your clinic each year?

We see around 10-15 new patients each year.

As the author of numerous published papers on EB, what trends have you observed in the incidence or severity of EB over the years? Are there any misconceptions about EB based on your research?

The incidence of EB remains about the same, the difference is the awareness from social media and the "snowball" phenomenon.

In 1995, our first EB families met more EB patients when they used to visit their dermatologist at the Mexican National Institute of Health. That's how DEBRA Mexico got more patients during the early years, but now with social media (Google, Facebook, Instagram, etc.,) they can find us and ask for an appointment.

The EB patients and their families search for help online, and they can find DEBRA centers around the world. Some patients were, and still are, referred to DEBRA Mexico via DEBRA Spain or DEBRA International. We have seen patients from Peru and others countries in South America.

In Mexico, the EB patients suffer from discrimination from the general population. Some airlines, restaurants and even just ordinary people reject our patients due to their appearance -- as they appear to have an infectious disease. Because of this, many patients suffer emotionally and share the same sad experiences. The daily pain from the blisters and erosion means nothing when they are rejected by others.

In general, there have been a few misconceptions about EB among the general population. For example, during our early years, EB patients were treated without dignity from a clinical standpoint -- people thought it was a contagious disease. Now, 22 years later, the patients themselves feel more confident about their illness and



Patient stories and announcements

they can explain the basis of the disease. The ignorance of people is, and has been, a difficult barrier to overcome. However, thanks to our campaigns in television, schools and social media, we have raised awareness of the disease and helped correct misconceptions.

What are the most important scientific contributions with your international collaborations?

Based on our research, there are several misconceptions about EB that have been clarified.

Firstly, dominant and recessive dystrophic epidermolysis bullosa gene mutations can overlap in the same family. Secondly, certain frame-shift mutations may lead to a milder phenotype because of a particular processing change in the gene that results in frame exon skipping. Thirdly, *de novo* mutations can occur in some cases of dominant dystrophic epidermolysis bullosa. Fourthly, certain recurrent mutations are common to the Hispanic Mexican population in Mexico. Lastly, certain mutations in type VII collagen may predispose to complications, such as squamous cell carcinoma, whilst others may not.

This provided fundamental new insights into the geographical location of mutant genes, as well as some fascinating unique social and human family stories. The work done with John McGrath, Angela Christiano, Andy South and Jouni Uitto has focused on genotype-phenotype correlation, which is fundamental to any platform for translational research. Over the last 15 years, we have also worked on trying to characterize the complication of squamous cell carcinoma that occurs in many patients with epidermolysis bullosa. We have exchanged and shared clinical data as well as

samples of skin and tumor material for laboratory analysis. A detailed understanding of skin cancer in patients with epidermolysis bullosa is pivotal in trying to prevent this complication and develop better therapies. We continue to work on characterizing mutations in inherited skin diseases together and also in collaborative writing of our scientific data.

In 2006, we did research analyzing the amount of collagen VII and the presence of squamous cell carcinoma. This won the award for best research protocol in Latin America, held in collaboration with John McGrath and Andy South. The prize was awarded by LaRoche Posay Laboratoire Dermatologique.

More recently, in 2013 -- in collaboration with Dedee Murrell and her team -- we published the Hispanic version of the Quality of Life in Epidermolysis Bullosa questionnaire. At the same time with my colleague Giulio Fortuna, we developed the score of Epidermolysis Bullosa Oropharyngeal Severity (EBOS).

What are your biggest challenges in providing care to EB patients? How do you address these challenges?

Survival in a poor country is so hard, and especially when our government does not help us properly.

Some patients live far away from us, and it is hard to see them or visit them more often. Each year we continue to have problems raising money. We are a small association, but we have been doing our best to support those affected by EB.

continued on page 15



One of several examination rooms



Common area



DEBRA Mexico House



Bunk beds for overnight stays

First Ever International Conference on Tropical Dermatology (ICTD 2016) held in Sri Lanka

Tropical Dermatology encompasses a wide array of dermatological problems that are unique and widespread in tropical and subtropical regions. Millions are known to suffer from these diseases, some of which are classified as neglected tropical dermatoses by the World Health Organization (WHO).

With the aim of creating a forum for exchange of ideas and expansion of knowledge on tropical dermatology among the dermatological community and to create avenues towards improvement in patient care, the Sri Lanka College of Dermatologists (SLCD) took the initiative of organizing the first ever International Conference on Tropical Dermatology, held August 11 - 14, 2016, in Colombo, Sri Lanka. The conference was supported by the International Society of Dermatology (ISD) and the WHO.

The conference was a great success, attended by 230 delegates from 24 countries around the world. The Kingsbury Hotel, located in the heart of Colombo, proved to be an ideal venue set against the breathtaking, tropical backdrop of the Indian Ocean.

With the theme “*Topics from Tropics*”, the conference spanned four days including a Clinical Case Demonstration on the last day. Forty-six renowned clinicians and scientists from 12 countries (Australia, Brazil, Cambodia, Germany, India, Iran, The Philippines, Singapore, South Africa, Thailand, United Kingdom and Sri Lanka) shared their knowledge and expertise as resource persons.

The lectures delivered by world leaders on tropical dermatology were of high scientific and practical value. Leishmaniasis and leprosy were two areas covered in greater detail with all other major tropical dermatology topics, emerging and re-emerging infections, pigmentary disorders and socio-dermatoses discussed as well. The clinical meeting with patients having numerous typical and atypical tropical dermatoses, the free paper sessions, and the e-posters were also outstanding.

The Inauguration Ceremony was led by SLCD President and ICTD 2016 Chairperson Dr. Janaka Akarawita, ICTD 2016 Coordinator Prof. Prasad Kumarasinghe, and ISD President Dr. Evangeline Handog who, as Chief Guest of the conference, delivered a very inspiring speech. The cultural presentation was a fabulous showcase of talented Sri Lankan artists and the excellent Sri Lankan and fusion food was a gastronomically delightful feast. ICTD 2016’s organizing committee truly gave their best effort, making the conference an unforgettable and memorable experience.

Many delegates managed to find some time to explore Colombo as well as other parts of beautiful Sri Lanka. There is no doubt that many would wish to return to this beautiful island in the not-too-distant future. Many old friendships between international delegates were renewed and many new friendships were established. Already, several participants have started planning work on new collaborative scientific research.



Traditional lighting of the oil lamp: Prof. Prasad Kumarasinghe (left) and Prof. Jayamini Seneviratne (right)



Meeting attendees



Sri Lankan dancers add flair to the Opening Ceremony



Dr. Evangeline Handog with local musicians from the Opening Ceremony

The organizing committee of ICTD 2016 humbly acknowledges congratulatory messages and appreciative comments received regarding the conference, not only from the resource persons and delegates but also from dermatological societies all over the world. The Sri Lanka College of Dermatologists is very grateful to all the guest speakers who came from far away countries to take part in this conference. The SLCD is also grateful to ISD President Dr. Handog and the ISD Board of Directors for supporting this meeting, and all the delegates who came from such diverse countries. The SLCD acknowledges with gratitude the sponsors from the pharmaceutical

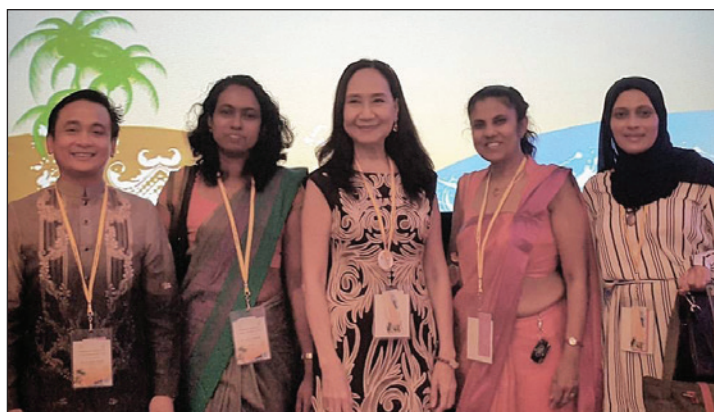
industry who supported this unique Tropical Dermatology Conference.

Considering the great success of ICTD 2016, Sri Lanka is already planning to host the next Tropical Dermatology Conference in 2020!

Report submitted by Prof. Prasad Kumarasinghe, (Coordinator - Organizing Committee ICTD 2016) and Dr. Janaka Akawarita (President SLCD, Chairperson - Organizing Committee ICTD 2016)



From left to right: Prof. Prasad Kumarasinghe, Dr. Regina Casz Schechtman, Dr. Marcia Ramos-e-Silva, Dr. Evangeline Handog, Dr. Vinod K. Sharma, Prof. Anisa Mosam, and event organizer Dr. Janaka Akawarita



From left to right: Dr. Johannes Dayrit, Dr. Indira Kahawita, Dr. Evangeline Handog, Dr. Chalukya Gunasekara, and Prof. Anisa Mosam



Dr. Evangeline Handog (second from left) at the Inauguration Ceremony

Global Dermatology

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What resources are most in need at your clinic?

Mainly volunteers, but also gauzes, antibiotic creams, and especially dressings. In Mexico, the dressings are so expensive and the National Institute of Health or even insurance companies do not pay for them.

How can ISD members help if they want to donate supplies or their time and expertise to help your patients?

ISD members can donate to our HSBC account or send their supplies to our P.O. Box in the U.S. They can contact us at debramexico@

hotmail.com or drjuliosalas@gmail.com for details. If any experts would like to come to our DEBRA Mexico House, we will be delighted to welcome them and work together.

We are also honored that our program has been awarded the Community Leadership Award by Galderma, and we hope that this recognition will help raise more awareness of DEBRA Mexico and our continual need for support within the international community.



ISD Members Work Together to Fight Leishmaniasis in Yemen

As featured in the Winter 2016 ISD newsletter, ISD member Dr. Mohamed Al-Kamel (Yemen) has been working tirelessly to help leishmaniasis patients in war-torn Yemen get needed medical care and supplies to treat this widespread disease. Relying solely on donations and volunteers, Dr. Al-Kamel's Regional Leishmaniasis Control Center (RLCC) is treating upwards of 100 leishmaniasis patients per month.



Dr. Mohamed Al-Kamel

Heeding his plea for help for medical donations, ISD Executive Committee Member Dr. Dedee Murrell (Australia/UK) went to work and initiated contact with Stiefel/GSK pharmaceutical to secure the donation of a second year of free supplies of anti-leishmaniasis medication (Pentostam® injections) for Dr. Al-Kamel's RLCC.

Although thousands of miles apart, Dr. Murrell and Dr. Al-Kamel came together in the true spirit of ISD by staying connected to help those in greatest need.

"Thanks to the ISD and particularly Dr. Dedee Murrell. The generous three-year donation of medicine to treat leishmaniasis, donated by Stiefel through the "Medicine-For-All" program, will help the countless Yemeni patients -- mostly women and children in the poorest rural areas -- who suffer from the severe physical and moral consequences of this disease. I consider the Teledermatology program of the RLCC as a model communication technology in which ISD members around the world can help one another -- even when they are thousands of miles apart -- in such a way as

Dr. Murrell and I worked together to support such needy patients with the most needed item: the medicine. I am proud we put the neglected leishmaniasis disease in Yemen and its linked issues under the focus of the local and global scientific communities."

-- Dr. Mohamed A. Al-Kamel, Founding Chair of the Regional Leishmaniasis Control Center (RLCC), Yemen

"At the EADV in Istanbul in October 2013, former ISD Executive Vice President, Luitgard Wiest, introduced me to Dr. Mohamed Al-Kamel, whom she knew from her volunteer work in Ethiopia over many years. She asked me to help him with a grant application he wanted to put in to the ILDS with the support of ISD for some diagnostic ELISA equipment for the Leishmaniasis centre he had set up. The grant application gained the support of the ISD executive committee and later turned out to be successful. Then, the idea came to me to request donation of the sodium pentogluconate (pentostam) from Stiefel/GSK. Through the Women's Dermatological Society (WDS), I had met Charlie Stiefel, a great supporter of the WDS. At that time, I had also been working with GSK to design a new clinical trial for pemphigus. Through these connections I reached the right person at GSK-Stiefel and wrote a request letter in November 2013 for a compassionate supply of \$10,000 per year for 3 years, signed by Drs. Kerdel, Handog, Reizner and myself, on behalf of ISD. Not only did GSK agree, but they promised \$30,000 worth of pentostam for 3 years, which is enough to treat about 2,000 patients per year. This is one example of how ISD can assist its members in poorer countries gain access to medications for needy patients."



Dr. Dedee Murrell

-- Dr. Dedee Murrell, Chair, ISD Communications Committee

Generally, one patient needs at least 1 injection per week for about 3 weeks. A 21-day course is \$15 (USD), therefore with 30,000 it can treat 2,000 patients per year. They have about 100 patients per month, or 1,200 patients per year, so the supply is providing.



Dr. Al-Kamel giving medicine to a young girl suffering from the disfiguring Mucocutaneous Leishmaniasis of the lips at RLCC's Al-Baydhaa unit.



Distributing donated medicine to needy students at primary and intermediate schools in the endemic Hajjah governorate by volunteers of the RLCC, Hajjah unit, Hajjah governorate, Yemen.

ISD Regional Meeting in China Draws Over 100 Participants and Attracts Dozens of New Members

More than 120 participants enjoyed the scientific feast and friendship during the Regional Meeting of the ISD held in Xiamen, China, on May 27, 2016. This meeting was co-organized with the 22nd National Congress of Chinese Society of Dermatology, with Dr. Xing-Hua Gao serving as the regional meeting president and Dr. Hong-Duo Chen and Dr. Jie-Zheng as honorary presidents.

There were 63 submissions included in the regional meeting proceedings, 25 papers of which were presented during the one-day event. World renowned dermatologists and scientists presented a variety of topics covering the new trends and developments in basic and clinic research of dermatology. Among the topics that sparked lively discussion were teledermatology, skin care, skin barrier, vitiligo, and basal cell carcinoma.

Jouni Uitto (US) explained the new insights about pityriasis rubra pilaris. Dr. Torello Lotti (Italy) talked about the progress in the development of skin care technology. Dr. Nellie Konnikov (US/Russia), secretary-general of ISD, introduced ISD and discussed future trends in teledermatology. Dr. Shigaku Ikeda (Japan) outlined the relationship between intrinsic skin barrier dysfunction and allergen-protease activity in the pathogenesis of atopic dermatitis. Dr. Qing-Sheng Mi (US) stressed that the immunopathogenesis of vitiligo mainly focuses on NKT cells and Th17 cells. Dr. Thomas Ruzicka (Germany) presented an overview about basal cell carcinoma. Dr. Bruno Berna (France) dwelt on hair pigmentation and hair graying. Dr. Yasmeena Khan (Pakistan) presented the pediatric skin problems in Pakistan. Dr. Jian-Zhong Zhang (China),

former president of Chinese Society of Dermatology, showed the history and current status of dermatology in China. Scientist Dr. Xun-Wei Wu (China) introduced the development of a new mouse model with human skin. Dr. Dino Tsai (Taiwan) shared his clinical experience on reaching treatment target of psoriasis patients. The other 14 distinguished speakers and talented young speakers from around the world presented their findings and research results, and the new concepts and new technologies in dermatology were fully communicated during this regional meeting.

At the conclusion of this successful regional meeting, 31 participants from China joined ISD as new members.

Report submitted by Hao Guo, Xing-Hua Gao and Hong-Duo Chen



Dr. Chung-Hong Hu (right) awarded Dr. Torello Lotti (left) the diploma



Dr. Nellie Konnikov introduced ISD



A few new members of the ISD



Prof. Xing-Hua Gao at the opening ceremony of the regional meeting



From left to right: Profs. Xing-Hua Gao (China), Nellie Konnikov (US/Russia), Thomas Ruzicka (Germany) and Jouni Uitto (US)

Behind the Scenes: Getting to Know ISD Board Members

Despite busy professional and personal lives, members of the ISD Board of Directors spend a significant amount of time working to improve the quality of all the benefits the Society offers its members. Their commitment to ISD is unwavering, and they play a vital role in nearly all aspects of the Society.



Dr. Jean Bologna

Here, meet ISD Board Member Dr. Jean Bologna (USA), Executive Vice President.

At present, you are involved in a number of prestigious dermatological organizations, holding top positions in most of them. What drives you in becoming involved in these groups, most specifically the International Society of Dermatology?

I enjoy the camaraderie and “can-do spirit” of the ISD, in addition to its international flavor. The first person who encouraged me to get involved in the organization was the late Dr. Coleman Jacobson. He and I were sitting at an airport waiting for the same plane and he gave me the “ISD pitch” and the rest, as they say, “is history”. We had met several years earlier in the Philippines, where we were both invited lecturers, as well as judges for the dermatology residents’ talent show. Given the intense scrutiny and the high stakes, judging the talent show proved to be a lot harder than giving a lecture.

Being a revered Contributor, Author and Editor of several books and journals, what can you advise to the aspiring dermatologists who wish to follow your path?

There are several characteristics that I would say are important: curiosity, a passion for learning, a strong foundation in general medicine, a strong work ethic, the willingness to “go the extra mile” for patients and projects, a lack of entitlement, and self-determination.

With your expertise and experience in the field of dermatology, how do you foresee this specialty in the coming decade?

I am very optimistic about the field of dermatology. There are hundreds of skin diseases that are only known to and understood by dermatologists. As a specialty, we possess a unique body of knowledge and, as such, are the keeper of the dermatology flame. Not only must we do all we can to keep that flame burning brightly, we must also acknowledge its existence. In other words, we must be proud to be dermatologists.

On the lighter side, how do you spend your day outside the field of dermatology? How do you juggle family and career?

I enjoy gardening, but focus primarily on perennials. For mental health, my advice is to buy personal infrastructure: hire someone to help clean the house, to help wash the clothes and to cut the grass. I say it is better to eat mac & cheese and have the house cleaned than to eat filet mignon and be up at midnight doing laundry.

Grants Available for ISD Regional Meeting in Dubrovnik, February 2-5, 2017

Six young dermatologists from around the world will be offered grants from the ISD to facilitate attendance at the ISD Regional Meeting in Dubrovnik, Croatia, February 2-7, 2017.

Grants include:

- 3 nights in a single room
- Free registration
- \$500 travel allowance

To be considered for a grant, applicants must meet the following criteria:

- Young dermatologist or resident (up to age 40)
- Adequate knowledge of the English language
- Submitted abstract for this meeting

All those interested in applying must send a CV with motivation letter and abstract by October 15, 2016, to branka.marinovic@kbc-zagreb.hr.

Notification of outcome will be sent by e-mail by October 30, 2016.

For more information on applying for a grant, visit: <http://www.isdregional2017.org/eng-grant.asp>

2016-2017 ISD Meetings Calendar

2016

October 27-29, 2016

Georgian Association of Photodermatology & Skin Cancer

Tbilisi, Georgia

Contact: photocancer@gmail.com

Web Site: <http://www.photoderm.org/index.php?lang=en>

2017

February 3-5, 2017

Many Faces of Dermatology - Clinical, Surgical and Aesthetical

Dubrovnik, Croatia

Web Site: www.isdregional2017.org

April 18-22, 2017

XII International Congress of Dermatology

Buenos Aires, Argentina

Website: <http://www.icd2017.com.ar/>



International Society of Dermatology

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Join online at www.intsocderm.org

(Please print or type clearly)

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(Last/Family) (First/Given) (Middle)

Institution _____

Address _____
(Street) (Apt. or Suite No.)

(City) (State/Region) (Postal Code) (Country)

Telephone _____ Fax _____
(Country/City Code) (Area Code) (Number) (Country/City Code) (Area Code) (Number)

E-mail _____ Birthdate _____
(Month/Day/Year)

Scientific Degree (e.g., M.D., M.B.B.S., Ph.D., M.S., B.S., etc.) _____ Gender: Male Female

1. I wish to join the ISD membership in the following category (please check only one):

INDIVIDUAL MEMBERSHIPS:

Regular Member US \$125.00
This is the regular and usual membership of the Society. Annual dues of US \$125.00 include a subscription to the *International Journal of Dermatology*. May hold elective office and vote.

E-Member US \$45.00
This is a new category of membership, which is available to members living and practicing in a Group A or Group B country as defined by WHO and the World Bank.* Available to those who are eligible, e-members will receive only electronic access to the *International Journal of Dermatology* and all correspondence will be electronic. (If you are a current member wishing to switch to this level, you need to contact the ISD office in order to change your membership status)
*A complete list of those countries can be found at <http://www.who.int/hinari/eligibility/en/>.

Associate Member US \$75.00
This category is suggested for residents/medical students of any country, or dermatologists currently staying in developing countries (designated by OECD). Annual dues of US \$75.00 include a subscription to the *International Journal of Dermatology*. Associates cannot hold elected office or vote on Society matters.

Individual Sponsoring Member US \$250.00
This category is for individuals who want to sponsor members from developing countries or trainees (residents) from any country. In addition to the privileges and benefit of the Regular Membership, the sponsor will receive an Individual Sponsoring Member certificate. The annual dues of US \$250.00 sponsor up to 2 Associate Members in addition to the sponsor's membership.

Sponsoring Members may select 1 or 2 eligible members to support or allow ISD to select from a list of eligible candidates.

Let ISD select the sponsored members

I would like to sponsor the following dermatologists and/or dermatologists in training. The names are listed below.

Sponsored Member Name: _____

Email: _____

Sponsored Member Name: _____

Email: _____

2. Payment is to be made in U.S. Dollars.

Indicate method of payment:

Check payable in US \$ to: International Society of Dermatology

Credit Card (preferable for applications made outside the U.S.; please complete the adjacent box)

3. Send completed application with payment by fax or mail to:

INTERNATIONAL SOCIETY OF DERMATOLOGY
8074 EAGLE WAY • CHICAGO, IL 60678-1080 USA

Phone: +1 386-437-4405 Fax: +1 386-437-4427

E-mail: info@intsocderm.org

Web site: www.intsocderm.org

Print clearly. Please check card type:

MasterCard Visa American Express

Card Number _____

Expiration Date _____

Cardholder's Name _____

Signature _____

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Register Now for XII ICD!

The late registration deadline for the XII ICD in Buenos Aires, Argentina, is February 17, 2017. Register now at www.icd2017.com.ar