

## Atopy School

Listening to the needs and questions of patients to improve patient care.

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## 31<sup>st</sup> EADV Congress

A look back at a successful event and an important milestone for EADV.

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## Climate change

Why is it so important that dermatologists become climate literate?

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## Taking responsibility for a most precious society

**Dermato-venereology covers a large scope of more than 2,000 diseases,** some less harmful, others more so (psoriasis and some manifestations of atopic dermatitis) and others still, life-threatening. Seeing, diagnosing and treating these diseases requires in-depth training. As illustrated by the hundreds of recent reports on the manifestations of

COVID-19-associated diseases, scientists not specialised in dermatology have not recognised and have therefore neglected to treat numerous COVID-associated skin diseases. This could be likened to a dermatologist not understanding a complex electroencephalogram or being asked to perform a liver transplant. This means that in societies where

patients have no direct access to dermatologists, for example, melanomas are frequently diagnosed relatively late, underlining the dramatic need to have extremely well-trained dermatologists/venereologists in all socioeconomic regions.

EADV represents more than 7,500 dermatovenereologists and our

congresses are among the largest dermato-venereology congresses worldwide. In 2022, they attracted more than 13,000 participating clinicians, including European and international colleagues who enrich EADV with their experience and focus. EADV's major task is to provide the infrastructure for the best and most cutting-edge training, coupled with exemplary congresses and specialist training for the young.

### Social and political responsibilities

Being the primary choice for training amongst dermato-venereologists, EADV respects geographical regional differences and needs, and seeks to offer training and socio-political support for those who require it. This calls for communication and interaction between European authorities and the European Union of Medical Societies (UEMS), who together ultimately define the possibilities and limitations of European medical disciplines. In parallel, strengthening partnerships with patient associations and closely cooperating associations, like those for nurses, will further improve patient care and in turn EADV's political power.

### Training and development

EADV has excellent relations with the European Society for Dermatological Research (ESDR) and the European Dermatology Forum (EDF). This is



especially important at the level of research and development (R&D) and training younger specialists in our field. Together, the three societies must emphasise that many, if not most, of the major developments



that have enriched patient care so much over the past 20 years were first developed by clinician-scientists and only then transferred to the industry.

### Financial responsibilities

A healthy society requires healthy finances. Successful congresses are our financial backbone. Our large congresses are also highly attractive to industry and help identify EADV as a strong and weighty industry partner.

### Important challenges

The ongoing devastating war in Europe is having an impact on many – imagine, while we are treating diseased persons, tens of thousands of children, youngsters forced to be soldiers, are being severely injured or killed. We need to maintain our humanitarian side as much as we can.

The COVID-19 pandemic is about to enter its third year; seemingly more contagious, yet less dangerous for many patients. Vaccines appear to attenuate the course of the disease, but do not control outbreaks. Nevertheless, the disease will continue to impact our future mode of communication in an unforeseeable way.

### The major challenge

Many of us have experienced a wonderful period of growth, friendship

and enrichment, but we have forgotten the environment. We are at a most dangerous tipping point; a point beyond which life will drastically change and have unexpected devastating effects, especially on the young. In Europe, we produce about 11-12 TCO<sub>2</sub>/year; as has been our way of life for the past years. Now, within the next 10 years, we must reduce our production to about 2-2.5 TCO<sub>2</sub>/year. Just imagine, flying from Europe to America consumes about 2.5 T CO<sub>2</sub> one way. Although politicians must take the lead, the responsibility is ours. So, the question remains; how do we continue to live a wonderful cosmopolitan life, attending important congresses and meetings? **Make them sustainable! If we all contribute, together we can resolve this.**



**Martin Röcken**  
EADV President  
(2022–2024)

**“Although politicians must take the lead, the responsibility is ours.”**

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## Editorial

### Skin diseases in winter

Unexpectedly, and after some years of mild winter, we are experiencing – at least in central and northern Europe - weather climes of old, namely cold temperatures and snow. I would therefore like to discuss skin diseases most commonly occurring in winter.

Cold, wind and the exchange of dry air outside and lack of humidity inside might induce skin dehydration and irritation, exacerbating certain skin diseases and conditions, such as seborrheic dermatitis, atopic dermatitis, cheilitis, Raynaud symptoms, windburn, itching dermatoses, psoriasis, cold urticaria and rosacea.

Acne might also get worse in winter. Mild sunlight reduces seborrhea and, therefore, mostly seborrheic dermatitis. Occasionally inflammatory acne lesions may improve in summer and worsen in winter. Winter weather conditions doubtlessly worsen atopic dermatitis and painful, cold-exposure cheilitis (chapped lips), which lip

licking might not help. The spasm and constriction of peripheral skin blood vessels in cold weather lead to Raynaud symptomatology in fingers and toes – especially in women –and the worsening of existing Raynaud’s disease. Affected skin areas become extremely pale and can turn deep purple, leading to necrosis, due to lack of oxygenation. Skin rewarming leads to erythematous, painful oedema. Cold wind can also cause windburn, a skin irritation that leads to dry, red, burning skin and itching, especially in individuals with dry skin. As cold air is also extremely dry, it reduces natural skin moisture.

One of the most common skin diseases potentially worsening in winter is psoriasis. The reduction of sunlight exposure in association with skin stress, infections and reduction of circulating vitamin D levels leads to exacerbation of the disease, which can be presented – among others – with phototherapy during the winter period. Autoinflammatory disorders,

and especially cold urticaria (cold hives) are also commonly low temperature-induced. Last, rosacea’s flushing and redness can flare up, especially after going indoors from cold weather to warm, dry conditions. Patients may experience the development of papules and pustules on facial skin, dry eyes and eyelids and facial redness. Warm beverages may worsen the condition.

Despite that, enjoy the wintertime and I cordially wish you Merry Christmas and a happy, successful and healthy New Year!



**Prof Christos C. Zouboulis**  
Editor



Atopic dermatitis

# Atopy School patient care

## The beginning of Atopy Schools

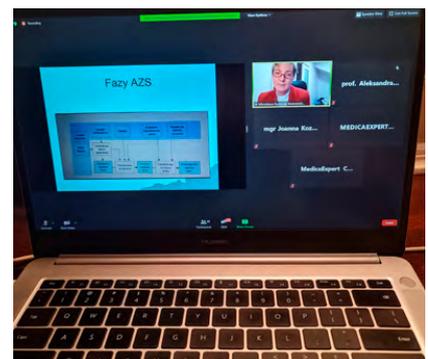
In 2019, we started organising Atopy Schools for bigger groups of patients. We hold four meetings each year, which are widely advertised via social media and among patients. Until the pandemic, these meetings took place in our department and welcomed 20–25 people at a time. Each meeting started with short lectures on the disease and its treatment, followed by workshops on how to deal with stress, bathe a baby, apply emollients and topical treatments. All participants had the opportunity to ask questions. Small gifts were given to children along with samples of emollients, as well as leaflets prepared by our team for all patients. The COVID-19 era moved our meetings online. Participants could register via a link and a similar format was followed. Participants were able to ask questions virtually. Our experts then answered them at the end of the meeting. We introduced a quiz with a possibility to win prizes, including sets of emollients, to encourage patients to take part in meetings. Following patients' needs, we decided to not only include dermatologists and allergists, but also nurses, psychologists, a dietician, a

Listening to the needs and questions of patients and their families enables us to change both more straightforward as well as more elaborate aspects of patient care.

**Atopy Schools, as a way of improving patient care for atopic dermatitis (AD),** started over 20 years ago. Broadly speaking, Atopy Schools represent an educational, interdisciplinary programme for patients – adults and children (including their parents). We see different approaches and specifics depending on the country and department providing such an activity.

## Different levels of support

In our department (Dermatology, Paediatric Dermatology and Oncology, Lodz, Poland), we provide educational support on different levels. AD is the most common cause of children having to stay in hospital in our department. Our paediatric dermatologists, nurses and psychologists provide individual education for these patients during their stay. They are referred to other specialists once discharged.



# – one way to improve

physiotherapist and an arts and drama teacher. Our aim is to create a place where patients with AD, especially children, can prepare for and take part in a theatre performance as actors (hence the addition of an arts and drama teacher).

## A need for structured programmes

Patients' and their families' expectations for such meetings must first be assessed. The majority of patients look for information about their disease on the internet. While social media and internet sites offer a lot of information on dermatological diseases, some may be misleading. Many studies have shown that structured educational programmes reduce the severity of AD, parental stress and anxiety, and help improve quality of family life and parental disease management. Educational programmes have been recommended in recent guidelines, however no consensus has been reached on best-practice form and content. Current knowledge supports an interdisciplinary approach to improve the wellbeing of patients and their caregivers based on the 'greater patient' concept, which results in greater adherence and compliance.

## Assessing participant satisfaction

In evaluating the programme we provide, our current study aims to investigate the impact of our online AD School on disease severity and family QoL (quality of life), as well as perceived levels of stress and symptoms of depression and anxiety in caregivers. The major objective of our



study is to assess the satisfaction of participants in an AD educational programme. We hope to present the results of our study soon.

The question remains how to fund such events. We would suggest looking for local or national grants, which may be available from councils or charities involved in AD.



## Improving patient care

Explaining the disease and its treatment increases compliance and adherence, but the challenges AD patients face are more numerous. Frequently, they feel excluded from "normal" life with friends and families. Addressing these issues seems to be as important as medical treatment. We strongly encourage organising Atopy Schools in dermatological departments to further improve patient care and support their families.



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# Designing the and Venereolo

focus in the extensive scientific programme. The scientific discussion started with the European Nail Society meeting on 7 September 2022 and continued throughout the congress with many lectures on the topic. Dr Michela Starace, Dermatologist at the University of Bologna, Italy, gave an interesting talk about the relationship between nutrition and nail diseases. Over-the-counter supplements are often used for nail fragility and nail disorders, although there is a lot of interest and doubt surrounding their actual benefit. Dr Starace's review of the literature regarding vitamin and amino acid supplements (such as zinc, biotin, vitamin D, nicotinamide, L-cysteine) specifically used for nails showed that although some studies suggest a benefit, data on safety and efficacy is limited regarding their use. One of the main problems is the lack of standardised treatment schedules

Our 31<sup>st</sup> Congress in 2022 marked an important milestone for EADV as it adopted a hybrid format, allowing delegates from around the world to reunite onsite in the beautiful city of Milan, Italy, or attend virtually via an interactive online platform. The congress featured over 600 speakers across more than 170 varied sessions, allowing physicians and researchers to enhance their daily practice and advance patient care. There were also many opportunities to exchange ideas and experiences with colleagues from across the globe to truly foster scientific collaboration.



## Top 10 Sessions

Plenary lectures

Late breaking news

Viral skin infections

Latest news in inflammatory skin diseases

Latest news in hair and nail disorders

Latest news in pigmentary disorders

Hair disorders

Nail disorders

Late breaking news

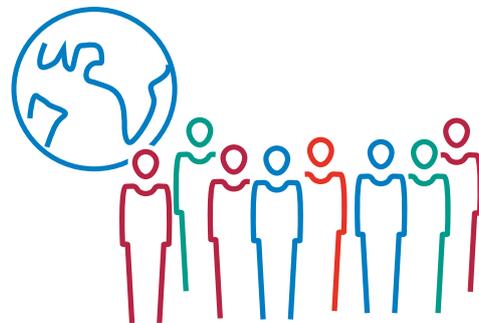
Opening plenary session

## Nail diseases

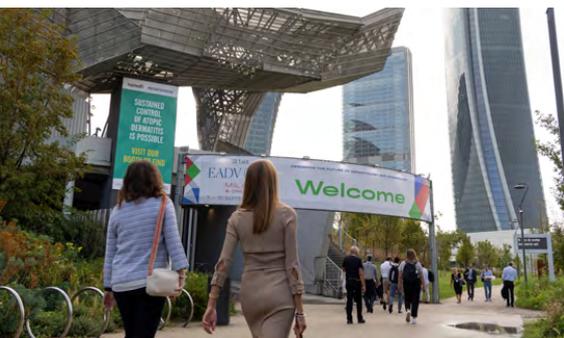
As with previous editions of the EADV Congress, nail diseases was a main



# future of Dermatology



**13.853** Participants  
from **123** countries



Grupo Español de Tricología, Madrid, Spain, and Academia Española de Dermatología y Venereología (AEDV), Madrid, Spain, in the Latest news in hair and nail disorders session. He was enthusiastic about emerging therapies in the field, especially with increasing options for this common yet unsolved problem.

for their use in different nail disorders. One should therefore be careful about recommending them as a therapeutic option for specific diseases. Equally, there is limited knowledge about their side effects, as they are not subject to specific regulations. There is a huge need for large-scale randomised control trials.

worldwide was one of the main discussions by Dr Ramon Grimalt, Faculty of Medicine and Health Sciences, Universitat Internacional de Catalunya (UIC), Barcelona, Spain. Cicatricial alopecia, which can cause irreversible hair loss especially on the fronto-temporal hair line in women, is claimed to be associated with emollients, sunscreens and other daily care products, although there is no concrete evidence to stop their use. However, Dr Grimalt emphasised that it is important for clinicians and researchers to understand the relation between the disease and these products.

## COVID-19

Dr Lluís Puig, Universitat Autònoma de Barcelona School of Medicine, Spain, discussed the most important aspect of treatment safety and COVID-19 infection in his lecture during the COVID-19 panel. He emphasised the higher risk for hospitalisation and severe COVID-19 in patients who are immunosuppressed and non-vaccinated. Recent systematic reviews suggest that there is no evidence that patients who receive systemic therapies and biologics have a higher risk of infection and/or increased hospitalisation and death related to COVID-19 compared to the general population, which is especially demonstrated in patients with >

**1,797**  
accepted  
abstracts

## Hair disorders

Equally important within the programme was the topic of hair disorders. The increasing prevalence of frontal fibrosing alopecia

The current treatment approach and future prospects of androgenetic alopecia (the most common hair loss type) was another hot topic. It was presented by Dr Sergio Vaño-Galván,

## Attendance by Continent:





**869** media editorials media coverage in **71** countries

### Other highlights

In addition to these mentioned highlights, attendees also enjoyed 11 exclusive plenary lectures with top-class speakers which pointedly highlighted the frontiers of our specialty and where its heading in the near future. There were also many hands-on workshops, patient and nurse dedicated events, sub-specialty sessions and late-breaking abstracts sessions. Those unable to participate onsite enjoyed a live-streamed and equally interactive outstanding congress to make sure that they did not miss a second of this rich scientific experience.

EADV's aim is to provide the best congress worldwide for both practitioners and academics. We want to represent the rapid progress of our field while also providing relevant information for clinical practice of all sub-specialties.

### Looking forward to Berlin

The scientific programming committee is already working hard on Congress 2023 to be hosted in Berlin, Germany, where you will see a programme reflecting the forefront of scientific progress, technological developments and new drugs, as well as a focus on new emerging diseases

and different topics, such as climate change and skin, skins of colour, nutrition and dermatology and more.

In the meantime, save the date for the Spring Symposium that will be hosted in Seville, Spain, on 18-20 May 2023, where the focused programme allows for an interactive exchange with the faculty.

[Abstract submissions](#) for the Symposium are now open. Submit your abstracts by 14 February 2023, for the chance to be included in the scientific programme.

psoriasis and rheumatologic diseases. However, this could be due to patients taking additional protective measures during the pandemic compared to the general public. A significant challenge he described was nonadherence to therapy and compliance with follow-ups in the era of coronavirus. He suggested physicians might choose therapies with a longer half-life so that if there were



**3.7 billion** opportunities to see EADV through media coverage

any problems with the treatment schedule, there would not be a sudden relapse. The research is ongoing for patients to get better management of the disease and COVID-19 risks especially in high-risk populations.



**Assoc Prof Aslı Bilgic**,  
Department of Dermatology and Venereology, Akdeniz University, Faculty of Medicine, Antalya, Turkey



**Prof Dedee Murell**,  
Department of Dermatology, St George Hospital, Sydney, Australia  
Faculty of Medicine, University of New South Wales, Sydney, Australia



# SCHOLARSHIPS CALL FOR APPLICATIONS

The EADV Honours and Awards Committee, under the chairmanship of Prof. Dr. Milos Nikolic, offers scholarships consisting of complimentary registration, a travel stipend of 1000€ and a free EADV membership for the 2024 calendar year.

The 2023 Spring Symposium is a face-to-face event; therefore, successful applicants are required to travel to Seville to attend the Symposium in person.

## MICHAEL HORNSTEIN MEMORIAL SCHOLARSHIP

EADV will offer this scholarship to one selected applicant from each Central, Eastern, Western & Northern European country.

## JOHN STRATIGOS MEMORIAL SCHOLARSHIP

EADV will offer this scholarship to one selected applicant from each Southern European & Mediterranean country (including Algeria, Cyprus, Egypt, Israel, Lebanon, Libya, Morocco, Palestine, Tunisia, Turkey, Syria)

## IMRICH SARKANY NON-EUROPEAN MEMORIAL SCHOLARSHIP

EADV will offer this scholarship to a maximum of twelve (12) young dermato-venereologists from non-European countries.

**IMPORTANT:** Applicants from Algeria, Cyprus, Egypt, Israel, Lebanon, Libya, Morocco, Palestine, Tunisia, Turkey, Syria must apply for the John Stratigos Memorial scholarship.

## MANDATORY CRITERIA

- Must be a Resident/Trainee OR a Specialist in Dermatology and/or Venereology OR a Scientist\* in the related field
- Must be under 40 years of age (at the time of the application)
- Must not have previously received one of the above EADV Scholarships
- Must have adequate knowledge of the English language

\*Scientists are required to reach a minimum of 25 points to be eligible, while the other two categories are required a minimum of 5 points

## REQUIRED DOCUMENTATION (in English only)

- The Scholarship Application Form completed online
- A short CV (not more than 3 pages)
- A list of publications written as explained in the document "How to prepare my publications list" available online
- A letter of support, written on official headed paper, signed and stamped, written either by the training director/ head of department, hospital or clinic endorsing the application
- A current copy in English of the applicant's training certificate indicating the start and end date OR of the specialist certificate
- A copy of ID (i.e. identity card, passport) with a passport-size photo

**IMPORTANT:** Only complete applications filled in according to the requested format will be considered by the Honours and Awards Committee. Applications that are incomplete and/or not filled in properly will be automatically rejected.

**APPLICATION DEADLINE: 10 JANUARY 2023**

Further information & application form available at: [eadvsymposium2023.org/scholarships](https://eadvsymposium2023.org/scholarships)

For any questions, please contact [scholarship@eadv.org](mailto:scholarship@eadv.org)

# Dermatology's call to emerge

While we know that skin is the largest organ on the human body and the primary interface with the environment, the speciality of dermatology was not represented when, in September 2021, 233 international medical journals published en masse an editorial calling for emergency action to limit global warming and adverse health effects related to climate change.

## Impact of climate change is wide-ranging

Many skin diseases are climate sensitive. When you look at climate change, there are several large categories of effects; increasing temperatures, extreme weather events, increased air pollution and more man-made substances that heighten UV radiation. All these impact skin disease in different ways, such as heat-exacerbated illnesses, dermatoses associated with flooding and skin trauma, air pollution and wildfire smoke acutely affect inflammatory skin diseases like atopic dermatitis (AD) and psoriasis.

The rising temperatures we see across the globe are leading to a greater range of vectors that transmit important diseases, e.g. an increased number of ticks in North America is leading to more cases of Lyme disease. We are seeing more mosquito-borne illnesses in other parts of the world. Dengue fever has expanded to many more nations. Going forward, we are likely to see the movement of more diseases from Africa and the Middle East, for example.

## Increasing climate literacy

While the impact of climate change on people will depend on where they live, we can expect infectious diseases, especially vector-borne diseases and those resulting from climate migration, to knock on every physician's door, regardless of where they are located. Climate literacy is therefore essential and should be part of our ongoing education as practicing dermatologists. It is important that at international congresses, such as those held by EADV, all such diseases are addressed to make sure that dermatologists working in areas where they are less common do not miss them in patients.

## Decreasing the dermatological carbon footprint

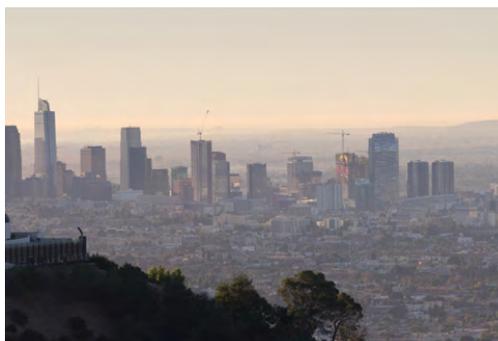
The healthcare sector is extremely carbon intensive. With its many procedures, large amount of generated waste and abundance of equipment, dermatology is one of the most carbon-intensive specialties. This means there is room for change to help lower our collective carbon footprint.

## What sort of steps can dermatologists take?

- Look for sustainable supply chains and manufacturers that have sustainability initiatives in place.
- Do a waste audit to see where in your practice you can minimise waste and make sure that waste is segregated properly.
- A lifecycle study of equipment will assess whether single-use items are more or less carbon intensive than reusable equipment that needs to be sterilised.
- Consider your practices and which small changes could help reduce your carbon footprint.

## Clean vs. sterile

Research into the impact on infection rates when procedures are



# Emergency action on climate change

carried out in clean versus sterile conditions show that there is little difference between the two. While these studies have not looked at the topic with a specific focus on the environment, they do offer an area for consideration; results indicate that equipment used in everyday procedures could be minimised. It is of course important to look at each case individually and weigh up risk factors for the patient.

## Running a dermatology practice in a more sustainable way

With regards to how one runs a practice, there are many simple behaviours that can make a difference.

- Turn down the heating by a degree or two (in northern territories) and allow two degrees more of temperature in the room (in warmer climates).
- Use renewable energies where possible.
- Install motion-sensor lighting to save electricity. Light-emitting diode (LED) light bulbs provide tremendous energy savings and have a longer life.
- Make sure taps and toilets are low flow.

- Consult [My Green Doctor](#) and engage staff in making changes.
- Telemedicine is a great way to help decarbonise your practice both in terms of managing patients and when it comes to learning.



**Prof Jan Gutermuth**  
Department of Dermatology,  
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Belgium



**Dr Eva Parker**  
Center for Biomedical  
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Vanderbilt University  
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## Reference

Parker, E. and Boos, M. (2022), Dermatology's call to emergency action on climate change. *J Eur Acad Dermatol Venereol*, 36: 1681-1682. <https://doi.org/10.1111/jdv.18416>

## Key takeaways

It is important for dermatologists to become climate literate so they can:

- Teach patients about their own vulnerabilities to climate change and help them build resilience.
- Advocate for education in residencies and medical school curricula.
- Be an active advocate for climate action.



This article is based on a podcast featuring Prof Jan Gutermuth and Dr Eva Parker.

Listen to the full podcast [here](#).

You can read more [here](#).





**EA**  
**DV** TOGETHER  
FOR BETTER

## Did you know?

- More than 7500 among specialists, residents, scientists, medical students and nurses have already joined the EADV Community.
- Our junior members take advantage of a reduced fee of 50€ for residents and 75€ for young dermatovenereologists.

## DISCOVER EXCLUSIVE MEMBER BENEFITS



### **EA** **DV** LEARNING

Extensive range of face-to-face and online courses, offering continuous medical education.

### **EA** **DV** JEADV

Leading international peer-reviewed journal with globally-recognized editorial board.

### **EA** **DV** FUNDING

A range of opportunities including scholarships, grants, research funding and fellowships in prestigious hospitals.

### **EA** **DV** JEADV CLINICAL PRACTICE

Open access peer-reviewed journal with cutting-edge clinical content of a more practical and hands-on-nature.

### **EA** **DV** GUIDELINES

Over 30 task forces focused on issuing guidelines for the prevention, diagnosis and treatment of skin and venereal diseases.

### **EA** **DV** EVENTS

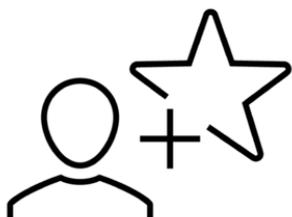
Benefit from reduced registration fees to join the over 10'000 delegates in attendance.

Applications and renewals for 2023 are open!

Don't wait any longer to make the most of your membership!

Join the EADV Community today!

For further information and to apply, please visit [eadv.org](http://eadv.org) or contact [membership@eadv.org](mailto:membership@eadv.org)



# Many benefits of EADV Membership

Dear Colleagues,

**I would like to express my gratitude on behalf of EADV for your continued membership and support throughout the past year.**

Your valued endorsement of our Academy has contributed to its ongoing success. As we near the end of this calendar year, it is a time to reflect on our shared accomplishments.

The past year marked an important milestone for EADV: our international community finally reunited for in-person activities following two years of virtual meetings. Almost 14,000 people participated at the EADV Annual Congress in September – our first hybrid event, welcoming both in-person and virtual attendees, as well as over 600 speakers across 170 scientific sessions.

With an Impact Factor of 9.228, the [JEADV](#), EADV's official journal, ranked fourth in the [worldwide visibility ranking of 93 dermatology journals](#). The *JEADV* seeks to further progress in dermatology and venereology by offering members access to cutting-edge discoveries with papers covering European guidelines, clinical and translational research and systematic and state-of-the-art reviews.

We also successfully launched EADV's new, open access publication, the

[JEADV Clinical Practice \(JEACP\)](#); a patient-focused journal with content covering the full scope of clinical practice.

Educational opportunities continued to flourish. Our learning platform and accompanying app now feature over 100 hours of educational content, including webcasts and CME-accredited digital courses, enabling EADV members to learn on the go. In 2022, we held 24 face-to-face courses for residents, specialists and nurses. Following the success of the Dermoscopy Summer School, we organised the EADV Autumn School, the first event of its kind. Bringing together over 40 renowned speakers and more than 300 participants, it covered a range of topics from sexually transmitted infections (STIs) to inflammatory diseases and from skin infections to hair and nails. This year, we awarded more than 1,000 scholarships and committed over 715,000 euros to fund research projects and fellowships.

These are just a few reasons why EADV membership makes a real difference to dermatovenereologists' careers. For 2023, we already have many new and exciting initiatives planned, including packed scientific programmes for our EADV Symposium 2023 in Seville, Spain,

and Congress in Berlin, Germany. Remember, all EADV members benefit from reduced rates to attend our events and have the chance to come together, learn from each other and meet leaders in their fields.

Membership renewal and applications for 2023 are now open. To make sure you continue to have access to all the benefits EADV offers and secure your rights as a member, which include voting rights and the ability to stand for or be involved in elections, remember to apply or renew your membership by 31 January 2023.

I wish you all an enjoyable festive season and all the best for the coming year!



**Prof Carmen Salavastru**  
EADV Secretary General

## Membership renewal – top tips

- If your address details have changed recently, please log into your [MyEADV](#) profile and update them. If a specific invoicing address is required, please inform us **before** your payment is processed.
- To maintain your voting rights, please make sure that your membership dues are settled by 31 January 2023 (in accordance with EADV Statutes).
- If your professional status has changed or you wish to modify your representing country, please inform us no later than 31 January 2023.
- To retrieve your password, use the "[Forgot Password](#)" tool. (Remember to check your junk mail folder).

## How to renew and apply explained

Log onto our [website](#) for step-by-step instructions.

Don't forget to apply or renew by **31 January 2023** to secure your membership benefits and rights.

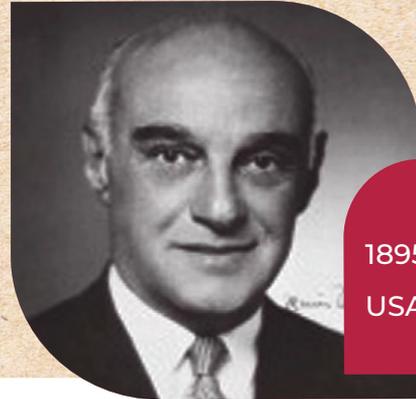
For any additional information or assistance, please contact the Membership Team at [membership@eadv.org](mailto:membership@eadv.org)



1878–1933  
Switzerland

## Bruno Bloch

## Marion Baldur Sulzberger



1895-1983  
USA

### **Bruno Bloch (1879 – 1933) Switzerland**

Bruno Bloch was born in Oberendingen, the son of a general practitioner who was the first Jewish medical student in Switzerland. He studied human medicine in Basel and in 1902, passed the state examination and trained in Basel where he established a dermatological department. He continued his dermatological training in Berne and in 1908 gained a postdoctoral lecturing qualification at the University of Basel on the subject of “dermatomycoses”. He was appointed associate professor and head of the now independent dermatology clinic in 1913. In 1916, Bloch was commissioned by the medical faculty in Zurich to establish a dermatological university clinic, making him the first dermatological full professor in Zurich. He died unexpectedly in 1933.

### **Marion Baldur Sulzberger (1895 - 1983) USA**

Marion Baldur Sulzberger was born in New York. He was a brilliant scholar during his school years, but dropped out of Harvard University, preferring to travel the world. He began his medical studies in Geneva, Switzerland, in 1920, before changing to the University Clinic of Zurich to train in dermatology under Bruno Bloch. Sulzberger was well trained in European dermatology when he returned to America. In 1949, Sulzberger became professor of dermatology and syphilology at the New York University-Bellevue Medical Center. He founded the *Journal of Investigative Dermatology* and the Society of Investigative Dermatology. In 1964, he was appointed professor of clinical dermatology at the University of California in San Francisco, USA.

During Sulzberger’s time in Zurich, he was intensively involved in dermatological research. He published case reports and laboratory work about the biology of fungal infections and allergic reactions. His illustrated records include a collection of outstanding documents, namely wax moulages, which have become important documents for historical research on the impact of wax models and illustrations on the development of dermatology.

Fig. 1



Fig. 2



Fig. 1 and 2

Moulage No. 245,  
Incontinentia pigmenti,  
made by Lotte Volger  
at the Clinic for  
Dermatology Zurich,  
1924



**Bloch and Sulzberger** examined the newly described pigment anomaly histologically in detail and concluded that the melanin deposits in the cutis were secondary to a pigment tattoo and originated from the epidermal melanoblasts either caused by functional aberration of epidermal basal cells or an inflammation of a so far unknown origin.

Bruno Bloch presented the case of 1½-year-old Margarete M. who had conspicuously arranged partly inflammatory pigmentary changes at the annual congress of the Swiss Society for Dermatology and Venereology in 1925. Bloch demonstrated the case with the help of a wax moulage moulded directly from the girl via a plaster cast. A picture of this moulage was also used in the publication of the case by Marion Sulzberger. The original wax moulage is still on display today in the Museum of Wax Moulages in Zurich.



**Dr Michael L. Geiges**  
Senior physician, Department of Dermatology, University Hospital Zurich  
Curator, Museum of Wax Moulages, University and University Hospital



## Incontinentia pigmenti Bloch-Sulzberger

Incontinentia pigmenti, or Bloch-Sulzberger syndrome, is a rare X-linked genodermatosis affecting mainly female neonates. The first manifestation occurs in the early neonatal period and progresses through four stages: vesicular, verruciform, hyperpigmented and hypopigmented. Clinical features also manifest through changes in the teeth, eyes, hair, central nervous system, bone structures, skeletal musculature and immune system.

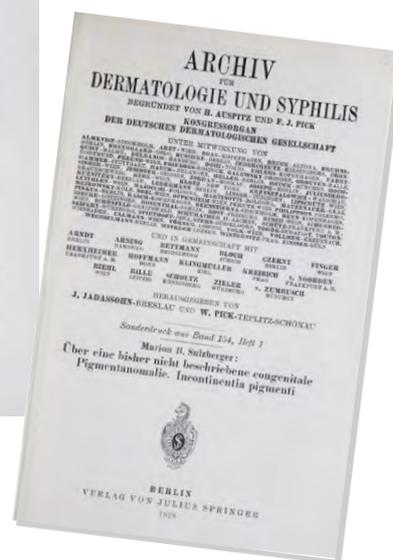
There are around 800 registered cases worldwide and the estimated incidence is about one to every 40,000 children

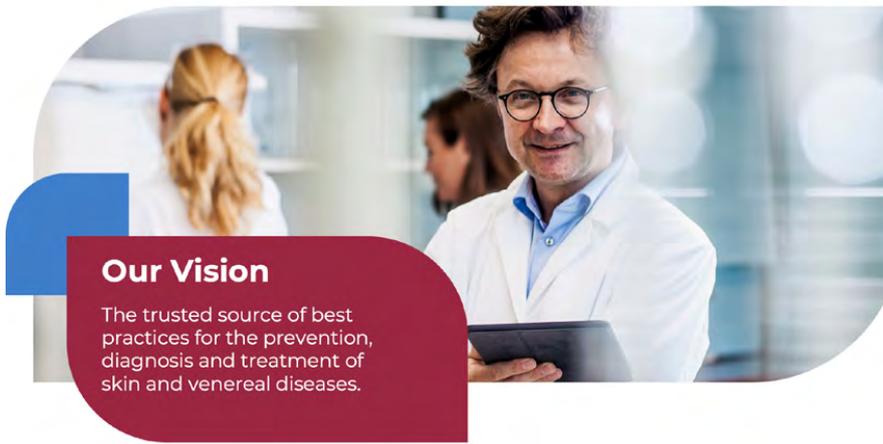
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### Our Vision

The trusted source of best practices for the prevention, diagnosis and treatment of skin and venereal diseases.

# Maintaining EADV's relevance for the future

Since our establishment in 1987, EADV has been building the international community that develops, shares and adopts best practices within dermatology and venereology.

**Today, we are proud to say that we are a true platform for collaboration and progress across borders and sub-specialities.** But it is key that we strive to maintain our relevance for the future. To help EADV to continue to differentiate ourselves as an international community that empowers our members, we decided it was time for a refresh of our mission, values and brand identity, and to find a new look and feel that both celebrates our long-standing heritage and creates excitement for a new generation of members and partners.

### Remaining true to our values

The project, which began in 2021, kicked off with a review of our existing branding and mechanisms to see where we could enhance value. Working closely with representatives from every group, we defined a positioning strategy for EADV to ensure we focus on our strategic ambitions whilst remaining true to our values. This positioning strategy seeks to make sure we can build strategic differentiation for the Academy.

### Taking a collaborative approach

The project group engaged in a series of workshops, interviews, analysis and discussions to identify different focal points. Their ideas were tested with an internal and external audience and honed based on feedback. The result was the motto "Together for Better".

The final implementation phase, with the support of key stakeholders and teams, involved updating the Academy's branding to ensure our new vision was evident across all our offerings, events and media. Our new logo seeks to build unity and

create recognition of EADV as a best practice community for dermatology and venereology.

### EADV's new mission

*Skin and venereal diseases are continuously evolving, as are the science and practices for preventing, diagnosing and treating them. Advancements are being made every day that have the potential to have significant impact in the ongoing battle to improve skin and sexual health around the world.*

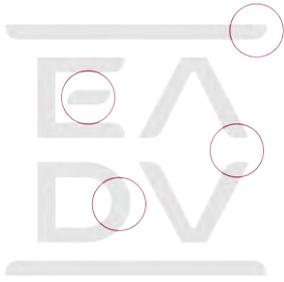
*Enabling these advancements to be validated, and ensuring the best practices are adopted by all professionals, is what ultimately moves dermato-venereology forward.*

*Our international community of passionate professionals define and spread best practices for the benefit*



### Our Mission

Building the international community that develops, shares and adopts best practices within dermato-venereology.



*of all. We are a true platform for collaboration and progress across borders and sub-specialities. Expert task forces shape standards and develop best practice guidelines, while our events, publications and school share them with members and the broader community so they can adopt them for impact.*

*With over 7,000 members, and an active community of more than 14,000 professionals around the world, our goal is to be the trusted source for proven scientific advancements and practices in the prevention, diagnosis, and treatment of skin and venereal disease.*

## EADV – together for better

## EADV's values

### COLLABORATIVE

**We believe in working together**, capitalising on one another's knowledge and expertise for the benefit of all.

### INCLUSIVE

**We maintain that everybody has something to contribute**, involving as many people as possible to maximise impact.

### PROGRESSIVE

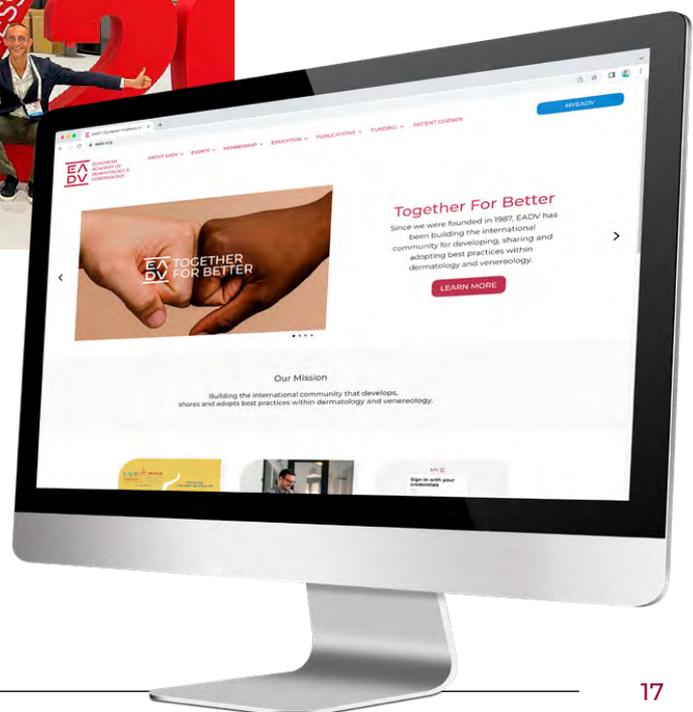
**We are always looking to improve**, encouraging each other to change the way things are done for the better.

### TRUSTED

**We are professional**, only sharing scientifically sound advancements so our members can move forward with confidence..

Thank you

A big thank you to our Branding Project team, Executive Committee and Communications Committee for their successful work on the EADV re-brand. This was a long and complex undertaking and we are grateful for their hard work and dedication. The end result is a new and improved brand for the European Academy of Dermatology and Venereology that accurately reflects our mission and values.



# EADV at the European Cancer Summit 2022

On 16 and 17 November 2022, the European Cancer Summit (ECS) 2022, organised by the European Cancer Organisation (ECO) took place in Brussels, Belgium, bringing together leading oncology experts, patient advocates, politicians and policymakers with one focus in mind: how to make cancer care in Europe more efficient, effective and equitable.



Christa de Cuyper, Anna Rouillard and Marlies Wakkee

**EADV was represented by Christa De Cuyper, Task Force Facilitator and Advocacy Working Group member, Marlies Wakkee, Epidemiology Task Force Chair, and Anna Rouillard, EADV Senior Public Affairs Manager.**

Although skin cancer is not at the top of the priority list of Europe's cancer projects, and skin cancer was not dealt with as such during the meeting, many presentations addressed topics of relevance for dermatology which can be integrated into EADV's advocacy programme.

During the meeting, we were able to connect with many members of the cancer policy community and raise awareness of the needs of skin cancer. Many of them confirmed that skin cancer, which is in fact the most common cancer, deserves a place on the policy agenda.

On skin cancer screening, in particular, we engaged with Eva Kondorosi, one of the European Commission's Chief Scientific Advisors, and Rebecca Fitzgerald, co-Chair of SAPEA (Science Advice for Policy by European Academies), and discussed our recommendations in this field. Both are interested in continuing to engage with us on this topic.

Marlies Wakkee's abstract 'The

impact of an AI-based App for skin detection: a first clinical practice evaluation in a population-based setting' was one of three abstracts chosen for oral presentation out of 130 submissions. Andreas Charalambous, ECO President, commented that Marlies Wakkee's research is 'potentially practice-changing.'

Marlies Wakkee commented "It was a pleasure representing EADV at the ECS. I thought it was an inspiring meeting that opens possibilities for us to see where we can grow as dermatologists and EADV with the various topic-focused networks. I think EADV members with specific research interest, e.g. in inequalities, survivorship care and digital health networks for skin cancer, could greatly benefit from this pan-European network. The European Cancer Summit also offered

Marlies Wakkee and resident Anna Smak Gregoor





Marlies Wakkee presenting on a panel which also included Andreas Charalambous, ECO President, Andre Ilbawi, Cancer Control Officer WHO, Ajay Aggarwal, Co-Chair ECO Summit, Nicolae Stefanuta, MEP and Sara Cerdas, MEP.

a podium and network to emphasise the need to include skin cancer in the various ECO networks.

"We spoke to a lot of potentially relevant people, including the Scientific Officer for cancer research funding within the European Commission's Directorate General for Research about the high need for skin-cancer-focused calls."

In conclusion, it is very important and relevant to have a dermatological voice within the European Cancer Organisation, to be kept up to date on EU goals and plans and to attract funding to support skin-cancer-related research on many different levels. Let us join efforts and make sure that we are on the agenda next year.



### Prof Christa De Cuyper

Chair of the European Academy of Dermatology and Venereology (EADV) Nurse Association Working Group (NAWG) and Task Force Facilitator (TFF); Former Head of Dermatology, Sint-Jan General Hospital, Bruges, Belgium



## EADV Leadership

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- MARINOVIC Branka (HR) President-Elect
- STRATIGOS Alexander (GR) Immediate Past-President
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- IOANNIDES Dimitrios (GR) Treasurer
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DE SUTTER Martine

# EADV acne and rosacea course, a very worthwhile experience

Acne and rosacea are two common skin diseases that are considered easy to diagnose and treat. That is however, in theory. In reality, patients present with cases that are very different from textbook examples.

EADV's acne and rosacea course that took place in Debrecen, Hungary, in September 2022, chaired by Dr Prof Daniel Torocsik and Dr Prof Eva Remenyik, sought to provide an overview of the challenges in diagnosing and treating acne and rosacea by both sharing expert opinions and translating up-to-date research findings. Covering in great depth the pathogenesis of acne and rosacea, the course proved to be a great opportunity to update, align and discuss the effectiveness and mechanisms of different therapeutic regimes and medications.

Dr Florentina-Alexandra Dobrescu, dermatology and venerology resident at Dr Victor Babes Clinical Hospital in Bucharest, Romania, says:

*"I was really looking forward to the acne and rosacea course and was certain that the two days would pass by very quickly. And they did! They were very intense days, packed with information and social interaction. As a fourth-year dermatology resident, close to becoming a specialist, I found the experience very useful. It offered an opportunity to take a step back and think about what I do and do not know about the main subjects of this course. I was also stimulated to ask myself more questions and try to look at things from different points of view, and to better get to grips with important and practical information."*

*"I also had the honour of meeting renowned dermatologists from around Europe which confirmed my belief that being part of a bigger, yet still very warm, family is more than possible, as is achieving greater professional dreams. The experience also reminded me of what a beautiful and fascinating profession I have chosen."*

*"I am sincerely thankful to EADV for offering me this opportunity and I advise all my colleagues to apply and have a chance to enjoy the experience."*



**Dr Florentina-Alexandra Dobrescu**

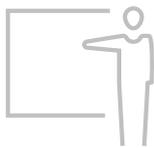
Dermatology and venerology resident at Dr Victor Babes Clinical Hospital, Bucharest, Romania.

EADV offers a wide range of [training courses](#) throughout the year to enable dermatologist and venereologist trainees and specialists, from Europe and around the world, to gain access to the highest standards of education.





# Education



## Face-to-face courses:

- ▶ **Cutaneous Ultrasound** | Residents | Specialists |  
Chair: *Carmen Rodriguez-Cerdeira*  
02–04 March 2023, Madrid, Spain
- ▶ **Comprehensive Melanoma Management in Clinical Practice** | Specialists |  
Chair: *David Moreno Ramirez*  
08–10 March 2023, Seville, Spain
- ▶ **Botulinum Toxin** | Specialists |  
Chair: *Andreas Katsambas*  
21–23 April 2023, Athens, Greece
- ▶ **Advanced Paediatric Dermatology** | Residents | Specialists |  
Chair: *Zsuzsanna Szalai*  
27–28 April 2023, Budapest, Hungary
- ▶ **Masterclass: Photobiology** | Residents |  
Chair: *Marie-Aleth Richard*  
20–21 May 2023, Seville, Spain
- ▶ **Dermoscopy in Clinical Practice** | Residents | Specialists |  
Chair: *Ahmed Sadek and Harald Kittler*  
26–27 May 2023, Vienna, Austria

See the full course programme and register [here](#)



## Online courses:

- ▶ Advanced STIs
- ▶ Cutaneous Lymphomas (CME Accredited)
- ▶ Introduction to Dermatopathology (CME Accredited)
- ▶ Introduction to Paediatric Dermatology (CME Accredited)
- ▶ Nail Surgery (CME Accredited)
- ▶ Nails Masterclass (CME Accredited)
- ▶ Pregnancy Dermatology (CME Accredited)
- ▶ Introduction to Photodynamic Therapy (**NEW**)
- ▶ Laser & Light Dermatology (CME Accredited) (**NEW**)
- ▶ Pearls in Dermatopathology (**NEW**)





## Calendar of Events

### 2023

#### The 2023 Skin of Colour Training Day UK

26–27 January 2023, Virtual Conference

[Continue reading >](#)

#### 12<sup>th</sup> Conference of the European Hidradenitis Suppurativa Foundation (EHSF)\*

8–10 February 2023, Florence, Italy – Hybrid event

\* Special registration fee for EADV and EHSF members

[Continue reading >](#)

#### 8<sup>th</sup> INDERCOS – International Dermatology and Cosmetology Congress

09–12 March 2023, Istanbul, Türkiye

[Continue reading >](#)

#### ISID2023

10–13 May 2023, Tokyo, Japan

[Continue reading >](#)

#### 18<sup>th</sup> EADV Symposium

18–20 May 2023, Seville, Spain

[Continue reading >](#)

#### 97<sup>o</sup> Congresso Nazionale SIDeMaST

13–16 June 2023, Naples, Italy

[Continue reading >](#)

#### 25<sup>th</sup> World Congress of Dermatology

3–8 July 2023, Singapore

[Continue reading >](#)

#### 32<sup>nd</sup> EADV Congress

11–14 October 2023, Berlin, Germany

[Continue reading >](#)

### 2024

#### 19<sup>th</sup> EADV Symposium

16–18 May 2024, St Julian, Malta

#### 33<sup>rd</sup> EADV Congress

25–29 September 2024, Amsterdam, The Netherlands

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