

## Towards a sustainable future

Dr Piccard's opening plenary session in Amsterdam

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## As of today, and beyond

As President, I am committed to continuing the path of transformation initiated by my predecessors towards the professionalisation of our Academy. The success of our congress programme by the Scientific Programming Committee (SPC), evidenced by the record-breaking attendance in Berlin, Germany, underscores our achievements as an Academy. Now, I look forward to personally welcoming you to Amsterdam, Netherlands, where we will jointly experience the vibrant spirit of dermatology and venereology

### A retrospective look at the past 12 months

A **workforce analysis** took place with the primary objective of optimising the EADV office structure and providing the best support for our congresses. Job descriptions were updated and aligned with the organisational structure and responsibilities harmonised with job titles. An assessment of potential development and training plans will be effectuated to further enhance the skill sets of team members. This will enable us to continue to grow our Academy. It is equally important to establish an infrastructure that coordinates the

scientific activities of the congresses, symposia, journals and educational programmes. And it is critical to strengthen scientific development and provide professional help to the SPC and Education Committee (EdC) from the Lugano, Switzerland, office. Importantly, this is a support structure. The scientific liberty, scientific programme and decision making remain fully in the hands of the committees and their chairs.

An external **cybersecurity audit**, initiated in 2023, was efficiently and effectively completed. The original report identified several risks and

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## As of today, and beyond

threats to the Academy. All concerns were immediately addressed. Importantly, as far as considered as reasonable by the external advisor, all problems have been resolved and continuous measures are in place to minimise risk. Importantly, member-related topics were not affected by the concerns.

As advocacy is intimately intertwined with the wellbeing of patients, it has been decided to **merge the Advocacy Working Group with the Patient Task Force** to create a task force that takes care of patients' interests and advocacy. To facilitate its tasks and optimise the outcome, the task force will receive professional support by ACUMEN.

After many years of discussions about '**Guideline development**' and collaboration between EADV and the European Dermatology Forum (EDF), a Letter of Intent has been signed by both societies. EADV and the EDF decided to jointly develop and publish guidelines. This is important, as the development is an extremely time-consuming and responsible task with strong implications for daily practice. The first guidelines on atopic dermatitis and psoriasis will be led by Prof Enno Schmidt.

It is a great relief and pleasure to communicate the decision to appoint



Ms Kimberley Zimmermann as the **new Chief Executive Officer (CEO)** of our organisation. This appointment comes because of Ms Zimmermann's exemplary performance as interim CEO. Ms Zimmermann has demonstrated strategic vision and dedication, making significant contributions to our organisation's success during this time. We are confident that her continued guidance will bring our organisation to new heights and ensure sustained growth and innovation.

It has been agreed to introduce a concept of **emerging collaboration with Asian Countries** including Japan, China and India, as well as the Middle East. This year, EADV will, for the first time, participate in various Middle Eastern meetings. Strategies are already underway for an EADV presence in India and possibly one other Asian country in 2025.

As part of our mission, EADV continues to support **projects that seek to reduce inequalities in patient care** through the promotion of high standards of education and by supporting countries where access to medicine and education is limited. In a gesture of support, EADV has made several donations to aid communities affected by war via contributions to non-profit charity organisations. We strongly emphasise the importance of promoting dialogue and empathy as essential components in the pursuit of peace.

Representing EADV, the Executive Committee (EC) decided to focus on our **impact on the environment**. To facilitate this, a supplier specialising in sustainability was selected, AIM. The company is currently working on analysing and developing alignment of intents from EADV congress supplier partners with the goal of shaping the journey towards a sustainable EADV congress. Just as the Olympic Environmental Council

(OEC) plans sustainable Olympic games, EADV plans to organise sustainable congresses. To implement this in our community, the Climate Working Group is currently focusing on the Amsterdam Congress with projects relating to a dedicated sustainability booth within the EADV resource centre and an ambitious cycling journey from the United Kingdom (UK) to Amsterdam with several countries involved. It is also toying with the idea of promoting eposters focused on sustainable working practices within the 'Young Tracks' of the Scientific Programme. In the long term, this working group must liaise the academic structures with the EADV office and AIM to reach our sustainability goals, beyond the challenge of being CO<sub>2</sub> neutral.

I am thrilled to announce that **EADV membership** has grown beyond 11,000 members from 126 countries/regions. The number of members is expected to continue increasing until 28 September 2024, the last day of the EADV Congress at least.

My EADV Presidency has been a wonderful journey and experience. As I hand over the care of the Academy to trusted successor, Prof Branka Marinovic, I wish her all the best for a successful and fruitful term.



**Prof Martin Röcken**

EADV President  
(2022–2024)

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## Editorial

# Coworkers, our invaluable assets

Success is all about teamwork, in which coworkers are substantially involved. The value of coworkers is a commonly discussed topic, especially as research suggests that 10% of employees do not feel valued in their workplace. Increasing turnover rates and the shortage of candidates in – not only - medical professions, the loss of required expertise and the cost of not appreciating a team is too high to ignore.

Coworkers are the backbone of any enterprise, contributing not only to its daily operations, but also to its long-term success and ability to innovate. From offering unique expertise, knowledge and skills to shaping a positive work environment, coworkers add an immense amount of value. That is especially true of coworkers who directly interact with patients, significantly impacting their satisfaction

and loyalty through their service quality. How many times have we heard from patients about the positive (and negative) impression they got from the behaviour of our front-stage coworkers?

Moreover, coworkers represent an institution both internally and externally. Their engagement and dedication often translate into a positive representation, which is crucial for maintaining public trust and organisational integrity.

Understanding these aspects of coworker contribution can help institutions create more supportive environments that recognise and leverage these invaluable assets and appreciate them.

All these thoughts have been in my mind after the announcement of the most valued coworker of *EADV News*,

Ms Adrianna Juraszek, that she is leaving EADV. Even if this editorial will not be sufficient to change her mind, I would like to thank her in public for her contribution and support in leading *EADV News* to its current level of success.



**Prof Dr med Prof honoraire  
Dr hc Christos C. Zouboulis**

Editor



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## Charting New Horizons: How Dr Bertrand Piccard's visionary leadership can guide dermatology towards a sustainable future

In his opening plenary lecture on Wednesday, 25 September 2024, at EADV's Congress in Amsterdam, Netherlands, entitled "Renewable Energy and Clean Technologies: The New Medication for Our World," Dr Piccard will delve into the urgent need for industries, including ours, to embrace renewable energy and clean technologies as vital tools in combating climate change. As dermatologists, we may not typically think of our field in connection with climate change, but Dr Piccard will challenge us to reconsider how we can lead the transformation towards sustainability, both within our industry and in the broader world.

Dr Bertrand Piccard is a visionary pioneer whose achievements in aviation exploration have captivated the world. He is renowned not only for his record-breaking around-the-world balloon flight in 1999, but also for his historic 2016 journey, the first-ever global circumnavigation in a solar-powered airplane. His achievements stand as a testament to human ingenuity and the boundless possibilities when we challenge the *status quo*.

### Addressing climate-related challenges

Drawing from his extraordinary experiences, during his session, he will

connect the dots between the innovative spirit required to achieve the impossible and the transformative leadership needed to address the climate-related challenges facing our industry today.

### Making the impossible possible

For those in the field of dermatology, this lecture offers a fresh perspective on how sustainability and environmental stewardship intersect with our work. During the session, Dr Piccard will share practical insights on how to lead the transformation within our industry, addressing the misconceptions that often hinder

progress and demonstrating how, by pushing boundaries, we can make the impossible possible.

This lecture is more than just a discussion on clean energy. It is a call to action for each of us to rethink our roles as leaders and innovators in our field. Dr Piccard's unique perspective will undoubtedly leave a lasting impact, challenging us to rise to the occasion and be part of the solution in a rapidly changing world.



**Michel Gilliet**  
Scientific Programming Chair





© Piccard Family - 1 March 1999. Breitling Orbiter 3 and its pilots - Dr Bertrand Piccard and Brian Jones - flying over the Swiss Alps after taking off to attempt the first round-the-world in a balloon.



©Solar Impulse/ Stéfatu/ Rezo.ch - Abu Dhabi, UAE, 1 March 2015. Solar Impulse 2 second test flight over Abu Dhabi.



### Dr Bertrand Piccard

© Solar Impulse/ Bertrand Piccard - Hawaii, USA, 9 April 2016. Dr Bertrand Piccard taking a selfie while flying over Hawaii with Solar Impulse 2.

**“The pioneering spirit is less about thinking up new ideas and more about ridding ourselves of dogmas and habits that hold us captive in old ways of thinking and acting.”**

Dr Bertrand Piccard is a modern-day pioneer in aviation exploration and innovation. His dual identity as a psychiatrist and explorer makes him an influential voice, listened to by the largest institutions which today consider him as a forward-thinking leader on the themes of innovation and sustainability.

Whether it is to protect the environment or to reduce inequalities, Dr Piccard seeks to highlight solutions by developing synergies where others see only contraposi-tions. To support his approach, he strives to unite the forces involved, raise public awareness and encourage political action. Dr Piccard is currently United Nations Ambassador for the Environment and Special Advisor to the European Commission.

# Navigating the future of dermatology: What to expect from our cutting-

“The exceptional plenary sessions at this year’s Congress offer a rich exploration of the most pressing and innovative topics in dermatology. Delegates will gain insights into cutting-edge advancements in melanoma treatment, the role of artificial intelligence (AI) and the impact of climate change on skin health. The sessions also cover emerging trends in sexually transmitted disease (STD) management, the complexities of pustular psoriasis and the future of Janus kinase (JAK) inhibition therapies. This year’s lectures promise to broaden your understanding and inspire new approaches in both research and clinical practice. We look forward to welcoming you to another fantastic Congress.”



**Michel Gilliet**  
Scientific Programming Chair

**Wednesday, 25 September 2024**  
12:00 – 13:00 CEST

## **Neoadjuvant treatment in melanoma**

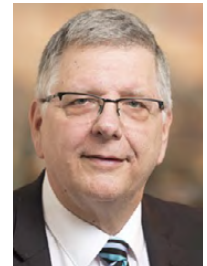
**Christian Blank** | Netherlands



Neoadjuvant immunotherapy treatment in melanoma refers to the administration of therapeutic agents before treatment, usually surgery, to reduce tumour size or burden. This approach is gaining traction in the treatment of advanced melanoma due to its potential benefits. Attending the session will enable delegates to understand the mechanism of action, the latest data on neoadjuvant immunotherapy and future steps towards the extent of surgery personalisation and the need for adjuvant therapy.

## **Artificial intelligence (AI): Friend or foe?**

**Hans Peter Soyer** | Australia



Artificial intelligence (AI) in dermatology represents a rapidly advancing frontier that has the potential to significantly enhance diagnostic accuracy, personalise treatments and improve patient outcomes. This capability is particularly promising for the early detection of skin cancers, where early diagnosis is crucial.

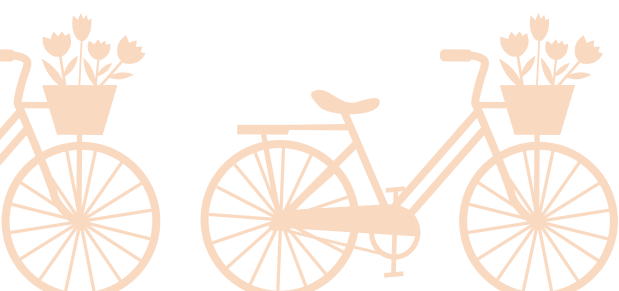
The integration of AI into dermatology also presents challenges. One major issue is the risk of reliance on technology, potentially leading to a decline in clinicians’ diagnostic skills. There is the question of privacy and the ethical use of personal health information. AI systems are only as good as the data they are trained on. Biases can lead to disparities in the accuracy of diagnoses across different populations.

## **Sexually transmitted diseases (STDs) in 2024**

**Henry de Vries** | Netherlands



Hear an overview of the latest developments in sexual healthcare and the disruptive effects of the COVID-19 pandemic on sexually transmitted disease (STD) epidemiology. Although the talk’s focus is on the Dutch and European situation, similar outcomes have been seen across the globe. Social and sexual distancing, a lack of healthcare resources and the eventual abandonment of lockdown measures all had profound influences on STD transmission. Mpox has been one of the coinciding global emergencies of international concern that coincided with the COVID-19 aftermath. The talk will conclude with a discussion of some of the measures at hand to curb future STD epidemics.



# edge plenary sessions

**Thursday, 26 September  
2024**

**12:00 – 13:00 CEST**

## **Does big data make us bigger?**

**Tamar Nijsten** | Netherlands

For big data to become truly valuable, it must undergo transformation through the addition of knowledge and expertise. Big data isn't just about volume, but also velocity, value, variety and veracity (the five vs). Delegates are encouraged to weigh the pros and cons of big data and AI, balancing their advantages and disadvantages, as well as the challenges that huge amounts of data present in clinical care and research. As data complexity increases, it can yield new insights, but also obscure our understanding. Clinicians must ask the right questions and critically interpret findings, as big data risks offering solutions to non-existent problems without proper guidance.



## **Pustular psoriasis: Clinical continuum or separate entity?**

**Jonathan Barker** | United Kingdom

Insights into immunological mechanisms, revealed largely by genetic methodology, coupled with advances in receptor targeted therapy show that psoriasis appears to cover several disease entities. This is evident when comparing plaque with pustular forms of the disease and in part explains differential response to treatment. Most strikingly generalised pustular psoriasis (GPP), in contrast to psoriasis vulgaris (PsV), is caused by pathways involving IL-36. Rapid resolution of the disease occurs when this pathway is targeted. Mechanisms underlying localised forms of pustular psoriasis, such as palmoplantar pustulosis (PPP), are more complex, with evidence of immunological plasticity and involvement of multiple immune pathways including Th2, perhaps explaining the inadequate response to therapies targeting PsV mechanisms. Delegates will glean a new way of looking at the classification of psoriasis with implications for natural history, co-morbidities and treatment selection.

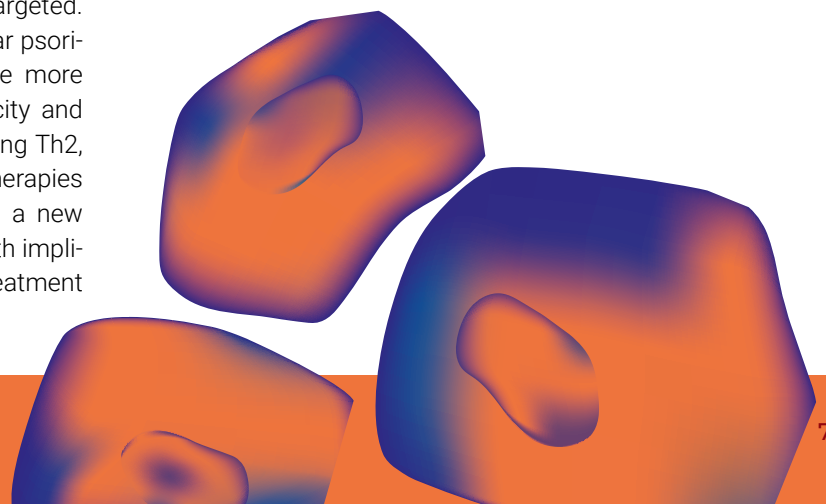


## **Climate change, pollution and skin cancer**

**Susana Puig** | Spain

Climate change is not only increasing mean temperatures, but also causing a rise in the number of sunny days and humidity, both of which increase the ultraviolet (UV) dose received by human skin. Pollution is also a growing threat to human health worldwide. Airborne pollution, including gases such as carbon monoxides (CO), nitrogen oxides (NOx), Ozone (O3) and sulphur dioxide (SO<sub>2</sub>), heavy metals such as lead, cadmium, nickel and arsenic and particulate matter also have a significant effect on organs, including the skin.

Recent epidemiological and mechanistic studies suggest that air pollution is affecting skin integrity as it influences our external barrier. Air pollution and ultraviolet radiation negatively interact with each other having an additive damaging effect on the skin. They are involved in many skin disorders from photoaging to skin cancer, as well as psoriasis, atopic dermatitis and other inflammatory conditions. It is not easy to avoid the negative effects of environmental pollution, but we can use some strategies to help the skin repair itself and protect it.





**Saturday, 28 September 2024**

12:00 – 13:00 CEST

**JAK inhibition: Quo vadis?**

**Massimo Gadina** | United States

Over the past ten years, drugs targeting Janus kinases (JAKs) have entered the clinical armamentarium. First generation pan-JAK inhibitors (JAKinibs) are now used worldwide for the treatment of autoimmune diseases as well as malignancies. Studies on the mechanism of action have revealed that, besides T and B cells, they act on innate immune cells and can promote tolerance. JAKinibs are proving to be useful for a variety of immunological diseases ranging from haematological malignancies, rheumatoid arthritis, psoriatic arthritis, diabetic nephropathies and alopecia to rare inflammatory diseases.



More selective, second-generation JAKinibs, as well as newer, third-generation JAKinibs, have now reached the clinical stage. Nonetheless, newer JAKinibs are also being developed taking advantage of our better understanding of JAKs structure.

Explore recent findings related to JAKinibs' mechanism of action, focusing on the issue of selectivity, side effects and toxicity, as well as the challenges that this relatively new class of drugs is facing.

**Insights on the skin barrier from severe ichthyosis**

**Edel O'Toole** | United Kingdom

Using harlequin ichthyosis as an example of severe ichthyosis, delegates will understand the clinical pathophysiology of this disorder, how it can be modelled in the laboratory and, from recent work on ichthyosis and JAK inhibitors using 3D and in vivo models and multiomic approaches, understand the effect on the skin barrier. The session will also cover public and patient engagement.



**The role of dermatopathology in modern dermatology**

**Dieter Metze** | Germany

Dermatopathology not only enables diagnosis, but also contributes to the understanding of skin physiology and pathogenesis of diseases and is often the basis for the development of new therapies. A multidimensional approach, in terms of histological patterns, algorithms, lesion lifespan, collision and interference phenomena, expands the possibilities of conventional light microscopy. The development of electron microscopy, confocal laser scanning microscopy, 5-D intravital tomography, *in situ* hybridisation, fluorescence *in situ* hybridisation (FISH), polymerase chain reaction (PCR) and gene expression profiling has greatly advanced the study of skin tissue. This has made it possible to identify new genetic, infectious, autoimmune and auto-inflammatory diseases and drug reactions. The integration of molecular data and morphology has led to a reclassification of many neoplasms and enables individualised tumour therapy. Dermatopathology will remain a backbone of dermatology in the future. This lecture dives into the detail.







EADV education

## A postcard from the EADV-ESDR Summer Research Workshop

**Androniki Lamia,**

Dermatology Resident, Andreas Syggros Hospital of Dermatology and Venereology, Athens, Greece

Postcard  
from Spain

### What a great experience!

*As a dermatologist, facing the clinical aspects of diseases and studying treatment effects via case follow-ups and clinical patient responses and meeting scientists involved in investigative dermatology and skin research projects, gave me better insight and expanded my in depth-understanding of various debilitating hereditary and immune-mediated disorders. The session covered all facets of regenerative medicine.*

*The speakers were exceptional and very approachable, providing information useful for both dermatologists and researchers. Diagnostic approaches, treatment strategies, future treatment breakthroughs, on-going research concerning disease pathogenesis and treatment possibilities were all thoroughly discussed. The cases, projects and presentations from fellow colleagues were as intriguing as they were educational. The hands-on lab work, involving bio-printing and skin cell culture, was a unique experience, especially for clinicians, and provided insight to the molecular level of skin biology and pathology.*

*Many thanks and congratulations to everyone involved!*

*Androniki Lamia*



Dear EADV colleagues



# BRIDGE TO THE FUTURE

## 7 Reasons to attend the



### 1 Professional development

EADV Congresses offer access to the latest advancements, research findings, and techniques in dermatology and venereology.



### 2 Networking opportunities

EADV Congresses provide a platform for experts, & leaders in the field, to build new connections vital for your career growth.



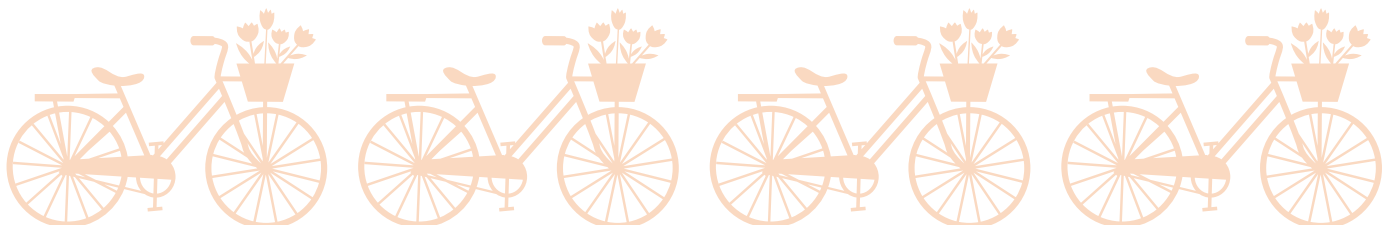
### 3 Diverse perspectives

EADV Congresses attract attendees from around the world with a wide variety of backgrounds. This exposure to diverse perspectives fosters learning, innovation, and the exchange of ideas.



### 4 Key opinion leaders

Congress delegates have the opportunity to interact with and learn from renowned experts and key opinion leaders in dermatology and venereology.



# EADV Congress 2024



## 5 Continuing education

Attending sessions and workshops held during EADV Congresses allows you to fulfill your educational requirements for improved patient care.



## 6 Latest research

EADV Congresses provide a platform for researchers to present their findings through oral presentations, posters, and abstracts, helping to disseminate new knowledge and promote collaboration



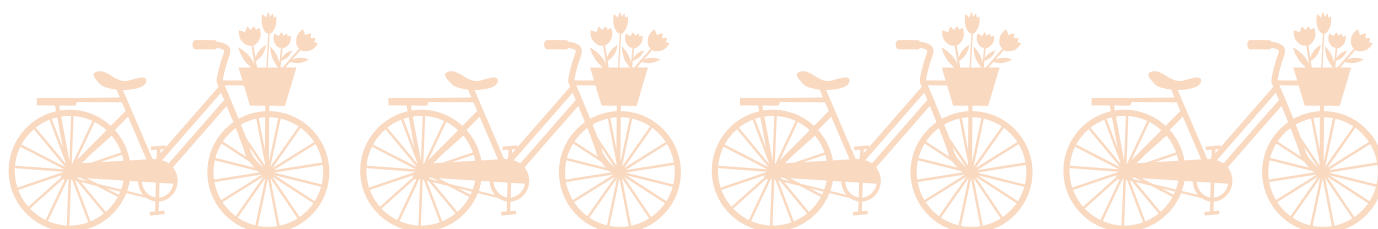
## 7 Meet Industry

EADV Congresses provide a great opportunity to learn about new solutions, industry trends and research, as well as the chance to network with key industry players.

Shape the course of global medicine

**Join the 2024  
#EADVCongress**

**Register now**





# Connect and step on a new bridge – Welcome to Amsterdam!

“A bridge to the future” is the guiding theme of this year’s EADV Congress in Amsterdam, Netherlands. What does this bridge look like to you? As a country known for its bridges, with over 85,000 spanning our landscape, we eagerly look forward to welcoming you to this year’s EADV Congress. We hope that the event will inspire you to take bold steps across your personal bridge in the field of dermatology.

As the Dutch Society of Dermatology and Venereology, representing nearly 600 dermatologists, we have set forth a vision for the near future that includes:

- a focus on sustainable, affordable and socially responsible care
- collaboration to ensure the highest quality of dermatological care
- encouragement for our members to invest in the resilience of their teams
- a commitment to ensuring patients are well-informed, receive ample consultation time and have access to care with reasonable waiting times

## Taking an active role

As experts in skin health, we encourage Dutch dermatologists to actively participate in decision-making platforms. We are eager to meet you at the Congress to exchange experiences and ideas.

## A unique opportunity to connect

Recognising the importance of training the next generation, EADV Dutch

Board members, Bing Thio and Markus Starink, along with input from enthusiastic dermatology residents, have collaborated with EADV’s Scientific Programming Committee to design a special [resident track](#) in a new format. This track, scheduled for Friday, 27 September 2024 and Saturday morning, 28 September 2024, promises to be an exciting event, providing a unique opportunity to connect with Dutch colleagues.

## Reducing our environmental impact

We also encourage you to visit the EADV Climate Working Group booth. In partnership with RAI Congress Center, EADV is committed to reducing the environmental impact of our congresses, a cause that we, as the Dutch Society, consider of utmost importance.

## Initiating open dialogue

Lastly, on Thursday, 26 September 2024, there will be an information booth at the bustling Dappermarkt in Amsterdam, in collaboration with the Dutch Skin Foundation (Nationaal Huidfonds). Entitled

“Skin@theMarket,” this initiative aims to engage with diverse marketgoers, answer their skin-related concerns, dispel common myths and provide guidance. While there will be a small private space for more in-depth conversations, the primary focus is on initiating open dialogue to connect people with appropriate resources.

Through these projects, we aim to bridge gaps, strengthen connections and build new ones, making this year’s Congress a true bridge to the future.



**Catherine van Montfrans**

EADV member, on behalf of:

**Hok Bing Thio**, EADV Board member, Netherlands

**Marcus Starink**, EADV Board member, Netherlands

**Dirk Jan Hijnen**, President of the National Dutch Society of Dermatology and Venereology







Our junior members take advantage of a reduced fee of 50€ for residents and 75€ for young dermatologists and venereologists

## EADV MEMBERSHIP

# EXCLUSIVE BENEFITS AWAIT YOU

Over 11'000 specialists, residents, scientists, medical students and nurses have already joined the EADV Community

### EADV EDUCATION

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

### EADV JEADV

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

### EADV JEADV CLINICAL PRACTICE

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

### EADV GUIDELINES

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

### EADV FUNDING

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

### EADV EVENTS

Benefit from exclusive prices to join the biggest dermatology and venereology events in Europe

Join the EADV Community today!

Applications and renewals for 2025 are open!  
We look forward to having you onboard  
Questions? Contact us at [membership@eadv.org](mailto:membership@eadv.org)



SCAN TO VISIT  
[eadv.org](http://eadv.org)

# Putting EADV's core values into practice in Amsterdam

More than 15,000 people are expected to join us in Amsterdam, Netherlands, for the 33<sup>rd</sup> EADV Congress with the common aim of improving the quality of dermatological care worldwide. How many will be representing patient organisations?

The EADV Patient Advocacy Task Force is about working together as dermatologists and patient leaders to set an example. We collaborate with diverse patient organisations, in an environment of mutual trust, to carry out progressive plans, always putting EADV's core values into practice. We firmly believe that people with a skin condition need to be listened to, within and outside the medical office.

At this year's Congress, we warmly invite you to:

- Visit our [Patient Organisation Area](#), right behind the entrance to the Congress. In a comfortable setting, over coffee, you can meet representatives from various patient organisations. You will find us next to a huge picture of the internationally renowned Dutch designer Bart Hess. As patient advocates, we hope that this picture makes your head turn, just as people with a skin condition are stared at, likely making them feel vulnerable and wishing they were able to hide behind a mask. And just as this model breaks out of her

'costume', let's join forces to empower people to break away from their need to hide.

- Join our scientific session entitled '*Collaborating in Novel Ways to Elevate Dermatology Research*' on Thursday, 26 September 2024, in Room E102, between 8:30–10:00 CEST. The session will showcase pearls from a research perspective: How can patient organisations and researchers be super effective in carrying out projects together.
- Visit us at the information booth at the bustling Dappermarkt in Amsterdam for a "Skin@theMarket," initiative supported by a team of dermatologists from various backgrounds. Here, we will answer skin-related concerns, dispel common myths and provide guidance. While there will be a small private space for more in-depth conversations, the main focus will be on initiating open dialogue to connect people with appropriate resources.
- Follow our [Skin @ School programme](#). Dermatologists are bringing national attention to skin

health and the impact of chronic skin conditions. Twelve dermatologists, along with a patient advocate (someone with a skin condition), will be delivering guest lectures at elementary schools across all 12 provinces in Netherlands.

We look forward to seeing you there!

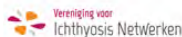


**Catherine van Montfrans**  
on behalf of the EADV Patient Advocacy Task Force.

**"We firmly believe that people with a skin condition need to be listened to, within and outside the medical office"**



## Participating organisations



# Make your trip to the EADV 2024 Congress a sustainable adventure!

In the last *EADV News*, the Climate Working Group announced its creation and highlight the plan for “Cycle to Conference” for the coming EADV Congress in Amsterdam, Netherlands. You can hear more on the [EADV podcast](#). Since then, EADV has appointed an international team of climate experts to guide the Society through its development and to establish corporate and conference practices compatible with climate protection.

## Climate change and dermatology

The annual EADV Congress on 25–28 September 2024 gives us the opportunity to highlight progress and important practice within the dermatology community with respect to climate change. During the event, members of the Climate Working

Group will be on hand with “the Climate selection”: talks and posters that explore the topic of climate change and dermatology.

## Optimising carbon used to attend events

As part of the broader agenda, we will be highlighting the matter of

travel and conferences. More than 15,000 people attended the EADV conference in Berlin 2023 coming from all over Europe and beyond. Travel is one of the largest elements of carbon footprint for large international events of any kind. The recent Euro 2024 football tournament was estimated to result in 490,000 tonnes of CO<sub>2</sub>, of which 70% was travel. EADV supports optimising the carbon used to attend such events.

## Consider your travel options

When considering travel options to get to the Congress in Amsterdam, if you are travelling from central Europe you may consider the extensive rail network to complete your journey. Some journeys by rail may even be faster door-to-door, than flying.



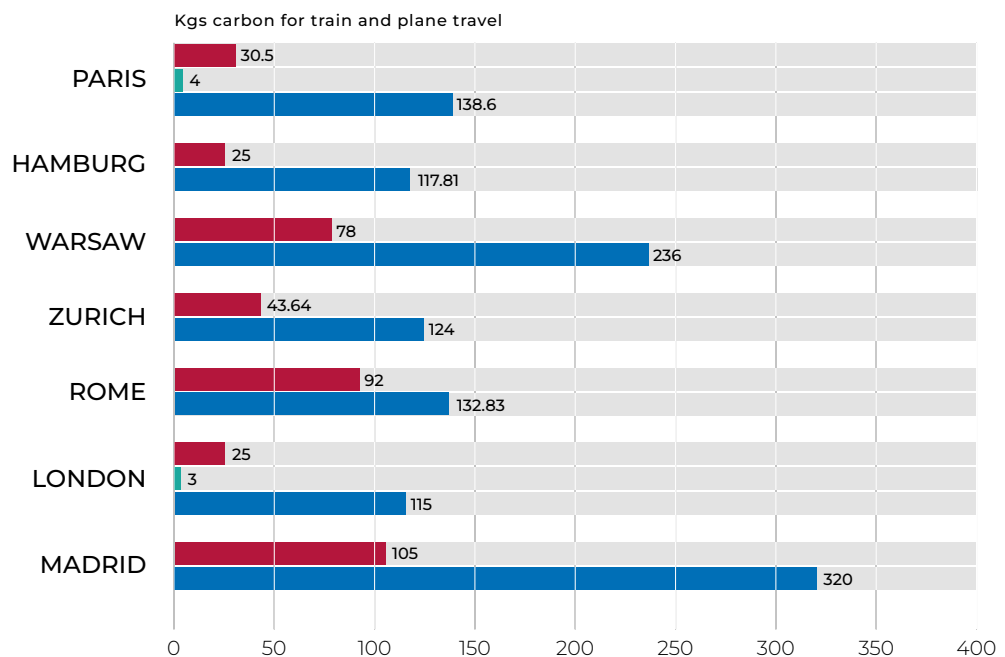
Rail return



Rail Eurostar



Plane return



Source: <https://www.deloitte.com/uk/en/issues/climate/content/travel-emissions-calculator.html>





### What you can expect in Amsterdam

If you are really keen, athletic or live close enough, you might consider cycling to the conference. And once in Amsterdam, cycling is an excellent way of seeing the city and getting exercise during your sedentary conference day. We will be supporting and promoting the following:

1. For those wanting to cycle to the conference from their home base or anywhere outside of Amsterdam, we encourage you to share your journey via social media – see <https://www.instagram.com/eadv/> or search @eadv on X (formerly Twitter)
2. Should you wish to get around Amsterdam like a local, why not [rent a bike](#)?
3. On Wednesday, 25 September 2024, between 15:00 and 16:00, we will host a welcome event at the EADV Resource centre, in the MyEADV booth on the entry level to the Congress in Hall 2. There, you will be able to read the abstracts with a climate theme, tell us what you, your teams and societies are doing to tackle climate change and see what EADV and the Climate Working Group are working on.

If you're interested in staying in touch with the work of the Climate Working Group, you can do so by contacting [Leadership@eadv.org](mailto:Leadership@eadv.org).



**Prof Hok Bing Thio**

Erasmus University Medical Center, Rotterdam, Netherlands



**Dr David de Berker**

University Hospitals Bristol NHS Foundation Trust

# EADV as a scientific and professional community and the rights of healthcare providers and patients: The way ahead

Several international instruments have sought to enshrine the importance of human rights. Perhaps the most notable of which is the Universal [Declaration of Human Rights](#)<sup>1</sup>. It was adopted in 1948 and represented an important step towards establishing the fundamental human rights to be universally protected, becoming the foundation of all international human rights law<sup>2</sup>. As a result, it is widely acknowledged that the right to health is a fundamental human right.

## The right to health

In its constitution, the [World Health Organization](#) acknowledges the right to health and other relevant human rights, which are legally binding obligations as set forth in various international human rights instruments. This is translated to Universal Health Coverage (UHC), which, as a concept, suggests that *“the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition”*<sup>3</sup>. UHC is a comprehensive approach that encompasses a range of essential health services, including health promotion, prevention, treatment, rehabilitation and palliative care.

## Ensuring universal access

States that have ratified at least one international human rights treaty have a legal obligation to develop and implement legislation and public policies that ensure universal access to safe and quality health services, and

to pay due attention to the conditions that enable individuals to live in the best possible health, while addressing the root causes of health inequities, such as poverty, prejudice and discrimination.

## The European context

Many organisations and governments around the world have legislated on health-related rights. In the European context, the [European Charter of Patients’ Rights](#)<sup>4</sup> was drafted in Rome, Italy, in November 2002 by the [Active Citizenship Network](#) in collaboration with 12 citizens’ organisations from different EU countries.

The European Charter of Patients’ Rights sets out 14 rights for patients, with an emphasis on ensuring that patients can access the preventive care they need, that they receive information and consent, that their privacy and safety are protected and that they can complain and obtain compensation.

Article 35 of the [Charter of Fundamental Rights of the European Union](#) is intended to contribute to the protection of human health and the maintenance of the high quality of services provided by the various national health services in Europe: *“Everyone has the right of access to preventive healthcare and the right to benefit from medical treatment under the conditions established by national laws and practices. A high level of human health protection shall be ensured in the definition and implementation of all Union policies and activities.”*

While the European Charter of Patients’ Rights does not have the force of law, it has nevertheless had an impact on legal and policy matters. In particular, it has provided patients with the opportunity to play a more active part in shaping the way in which health services are delivered, and it has sought to translate the rights to health set out in various international documents into meaningful provisions.

## Recognising rights

It is encouraging to see that significant progress has been made in recognising the right to health and the rights of patients. The right to health encompasses the essential element of patient care. However, it is important to acknowledge that despite the best efforts, not always all patients receive equitable care.

This has led to the persistence of healthcare disparities among different racial and ethnic groups, with the most vulnerable groups being the most affected.

### Safeguarding patients' rights

Professional medical organisations have an important responsibility in safeguarding patients' rights. One of their key roles is to ensure that patients are aware of their rights. They can also provide valuable support to stakeholders in the creation of policies and legislative frameworks, as well as in the development of mechanisms to ensure that patients have access to safe and respectful care.

While several international instruments and national policies do refer to the right to health and the right of patients, they also indirectly acknowledge the role of healthcare providers in ensuring the realisation of these rights. It seems that there is no explicit recognition of physicians' rights in international instruments. However, these rights are addressed in national provisions or legal frameworks and professional codes of ethics.

### Safeguarding the rights of healthcare professionals

In the absence of international agreements that safeguard the rights of healthcare professionals, and through the interpretation and application of treaty provisions in international forums, a number of rights that can be applied to the healthcare sector are recognised in various international agreements. These include the right to decent working conditions, the right to freedom of association and the right to due process. Examples of such agreements can be found in the [International Covenant on Economic, Social and Cultural Rights](#), the [African Charter on Human and People's Rights](#), the [International Covenant on Civil and Political Rights](#) and the [European Convention on Human Rights](#).

It is of the utmost importance that healthcare providers can care for their patients and practice medicine without interference. It is also worth noting that healthcare providers may sometimes encounter challenges, including unsafe working conditions, sanctions for providing healthcare in contexts where there is political corruption, limitations on their freedom of association, and situations where they are required to provide a standard of care that may not align with their ethical principles.

It appears that there have been instances where there has been a discrepancy between public policy and the principles endorsed by professional medical associations. In such circumstances, the role of medical organisations is particularly crucial, as they can serve as a valuable bridge between policymakers and stakeholders.

### EADV's role

Considering these reflections, EADV has contributed to the shaping of a European legal framework through our [Advocacy Working Group](#) with the aim of reinforcing the position of dermatology and venereology and raising awareness about skin and sexual health and prevention.

Furthermore, EADV is committed to enhancing patient care. This includes the development of [guidelines](#) based on the most rigorous and evidence-based research, as well as the [Patient Advocacy Task Force](#) activities and programmes.

The concept of human rights is fundamental to the safeguarding of the interests of both patients and healthcare providers. It is evident that the rights of patients and healthcare providers are closely intertwined. This interdependence makes healthcare providers key stakeholders, and it is therefore essential to protect their rights as a matter of principle and to the benefit of the patient.

In conclusion, it can be said that the rights of healthcare providers are weighed against the responsibilities that they have towards their patients, in addition to the ethical standards that must be upheld by all. In the absence of a clear understanding of and commitment to the rights of healthcare providers, it becomes challenging to guarantee and protect the rights of patients. This ultimately undermines the basic human right to health.

Energy, passion and commitment?  
Get involved. EADV needs you!



**Prof Carmen Salavastru**

EADV Secretary General

- 1 [United Nations, United Nations Human Rights, Office of the High Commissioner. \*Universal Declaration of Human Rights\* | OHCHR. Retrieved August 2024.](#)
- 2 [Human Rights Law". United Nations. Retrieved August 2024.](#)
- 3 [Constitution of the World Health Organization \(PDF\). Geneva: World Health Organization. 1948. Retrieved August 2024.](#)
- 4 [European Charter of Patients' Rights \(PDF\). Active Citizenship Network. Retrieved August 2024.](#)
- 5 [European Parliament. Official Journal of the European Communities. \*Charter of Fundamental Rights of the European Union\*. \(200/C 364/01\) \(PDF\). Retrieved August 2024.](#)



# Face-to-face activities

2024



## JANUARY

### Paediatric Dermatology

*Ramon Grimalt*

11–12 January 2024

Barcelona, Spain

### Peelings from A to Z

*Fotini Bageorgou*

12–14 January 2024

Athens, Greece

## MARCH

### Injectables on Cadavers

*Myrto Trakatelli*

1–3 March 2024

Thessaloniki, Greece

## APRIL

### Laser & Light in Modern Dermatology

*Leonardo Marini*

10–12 April 2024

Trieste, Italy

### Therapeutics in Hair Loss and Hair Transplant

*Sergio Vañó-Galván,*

*David Saceda*

17–19 April 2024

Madrid, Spain

### Confocal Microscopy in Clinical Practice

*Salvador González*

19–20 April 2024

Madrid, Spain

## MAY

### Supportive Oncodermatology

*Azael Freitas-Martinez*

9–11 May 2024

Pozzuoli, Naples, Italy

### Masterclass: Facial Dermatoses

*Marie-Aleth Richard, Elena Rossi*

18 May 2024

St Julian's, Malta

## JUNE

### Mohs Micrographic Surgery

*Mihaela Leventer*

8–10 June 2024

Bucharest, Romania

### Tropical

### Dermatology

*Markus Starink,*

*Colette van Hees*

19–21 June 2024

Amsterdam, Netherlands

### Intermediate Surgery

*Myrto Trakatelli*

27–29 June 2024

Thessaloniki, Greece

## JULY

### Summer Workshop:

### Dermoscopy

*Aimilios Lallas*

1–5 July 2024

Thessaloniki, Greece

### EADV-ESDR Summer Research Workshop: Skin Regenerative Medicine

*Fernando Larcher,*

*Diego Velasco*

1–5 July 2024

Madrid, Spain

## AUGUST

### Systemic Treatment in Dermatology

*Carle Paul,*

*Marie-Aleth Richard*

28–31 August 2024

Toulouse, France

## SEPTEMBER

### Dermoscopy

*Monika Arenbergerova*

6–7 September 2024

Prague, Czechia

### Intermediate Dermatopathology

*Maite Fernández-Figueras*

**NEW DATES:**

19–21 September 2024

Barcelona, Spain

## OCTOBER

### Genetics & Mosaicism

*Neil Rajan*

4–6 October 2024

Barcelona, Spain

### Infectious Diseases and Difficult Wounds for Nurses

*Christa De Cuyper*

23–25 October 2024

Paris, France

## NOVEMBER

### Visual Literacy in Dermatology

*Sarah Walsh, David de Berker,*

*Christopher Griffiths*

7–9 November 2024

London, UK

### Advanced Surgery

*Elena Rossi*

14–16 November 2024

Rome, Italy

### Genital Dermatology and Genital Infections

*George Sorin Tiplica,*

*Michael Waugh*

13–14 November 2024

Bucharest, Romania

### Contact Dermatitis

*Margarida Goncalo*

27–29 November 2024

Coimbra, Portugal

## DECEMBER

### Mycology

*Ditte Marie Saunte*

12–14 December 2024

Copenhagen, Denmark

### Rare Skin Disorders

*Christine Bodemer*

19–21 December 2024

Paris, France

Check our [website](#) for information about courses for 2025





## ANNUAL GENERAL MEETING 2024

Notice is hereby given that the

### 2024 Annual General Meeting (AGM) of EADV

will be held as follows:  
in Amsterdam, Netherlands  
RAI Amsterdam  
Hall 7 – Room 7.1

**on Friday, 27 September 2024**

starting at 12:30 hours CEST

(registration will open at 12:00 hours CEST)

#### AGENDA

1. Call to order by the President, comments and previous General Meeting
2. Presentation of the Reports  
(for information only):
  - i. President
  - ii. Secretary General
  - iii. Treasurer
3. Election of President-Elect
4. Date and time of next meeting

June 2024

**Prof Carmen Salavastru**  
EADV Secretary General

#### EADV Leadership

##### Executive Committee

RÖCKEN Martin (DE) President  
MARINOVIC Branka (HR)  
President-Elect  
STRATIGOS Alexander (GR)  
Immediate Past-President  
SALAVASTRU Carmen (RO)  
Secretary General  
DE RIE Menno (NL) Treasurer  
GONÇALO Margarida (PT)  
Board Representative to the EC  
TZELLOS Thrasyvoulos (NO)  
Board Representative to the EC

##### Board of the Representatives

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BAKIC Mirjana (ME)  
BARDHI Brunilda (AL)  
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LAZARIDOU Elizabeth (GR)  
LESIAK Aleksandra (PL)  
LEVENTER Mihaela (RO)  
LITUS Aleksandr (UA)  
MENDES BASTOS Pedro (PT)  
MERCIECA Liam (MT)  
MICALI Giuseppe (IT)  
MOLLOY Kevin (IE)  
OSMANCEVIC Amra (SE)  
PASQUALI Paola (ES)  
PRIGNANO Francesca (IT)  
PROHIC Asja (BA)  
RATZINGER Gudrun (AT)  
RICHARD Marie-Aleth (FR)  
RICHERT Bertrand (BE)  
RUDNICKA Lidia (PL)  
SAUNTE Ditte Marie (DK)  
SIMON Jan-Christoph (DE)  
SKERLEV Mihael (HR)  
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STARINK Markus Vincent (NL)  
STRÖMER Klaus (DE)  
SVECOVA Danka (SK)  
THIERS Bruce H. (INT)  
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ZAK STANGELAND Katarina (NO)  
ZASLAVSKY Denis (RU)

##### CEO

Kimberley Zimmermann



Robert A. Thom, Artist

Figure 1

# Galen of Pergamon

129 to  
circa 216 CE

Many physicians have been honoured by eponyms for having described a new disorder or for formulating a new therapeutic agent, but how many have had a cold cream named after them? That unique distinction belongs to Galen of Pergamon (129 to circa 216 AD), the noted Roman and Greek physician who served three emperors of Rome: Marcus Aurelius (121-180 AD), Commodus (161-192 AD) and Septimus Severus (145/146-211 AD). The eponym is called *Ceratum Galeni* in Latin and *Cerat de Galen (Galien)* in French(1).

## One of the oldest dermatology-related eponyms

We remember Galen as one of the most accomplished physicians of antiquity. Yet, he was also a leader in the practice and teaching of pharmacy. Figure 1 shows an oil painting by the American Artist Robert Thom (1915-1979) entitled

*Galen – Experimenter in Compounding (131–201 AD)* that was of a series of illustrations called *A History of Pharmacy in Pictures* which was commissioned by Parke, Davis and Company and launched in 1957. The painting shows Galen administering his cold cream and a woman rubbing the mixture onto her arm. *Ceratum Galeni* is one of the oldest

dermatology-related eponyms that honours a physician's name. The earliest historic mention of the term can be found in the writings of the French physician and surgeon Guy de Chauliac (circa 1300-1368), who mentions "Cerat de Galen" in his 1363 book *La Grande Chirurgie*(2):

*Et on approuve le cert de Galen fait de cire et d'huile roast*

(Our translation: And we approve the Cerat of Galen made of wax and rose oil)

Beautiful apothecary jars from the 18<sup>th</sup> and 19<sup>th</sup> centuries have the words *Cerat Galeni* or *Cerat*

*De Galien* written upon them as shown in nineteenth-century jar (Figure 2).



### Galen's cold cream

Galen describes the compounding of his cold cream as follows:

*"For some patients I have myself also put together ointments of a rather thick consistency, so that they would not readily be dispersed. This is done through the use of wax and of other cooling substances. First, make what is known by doctors as a 'wax-oil', then soften it very well with your hands in a mortar, and pour on a cooling juice, stirring it in for a long time until you have a homogeneous mixture. You will find a written account of the materials of such cooling juices in my treatise on Simple Drugs. The most readily and easily accessible are those of houseleek, hound's berry, navelwort, fleawort, knotgrass, water chestnut and purslane. This last does not produce juice except by being ground in a mortar, with the addition of some other juice which is moist, fine and watery in its consistency, viscous and thick, like that of unripe olives or of roses. These are available in summer, while many of the others are available in other seasons too; the juice of lettuce, for example, is also one of the cooling ones. Linseed, too, when boiled in water, produces a cooling juice."*<sup>(3)</sup>

### Galen's key ingredients:

- 1 Wax, presumably beeswax, if not otherwise denoted. The Latin term ceratum derives from "cera", meaning "wax". The wax serves as an emulsifying agent for the water-oil ingredients described in numbers 2 and 3.
- 2 Oil derived from unripe olives.
- 3 Cooling juice, for which Galen gives several examples, including purslane mixed with the juice of roses. Rosewater and oil of roses became popular ingredients of Galen's cold cream. The cream's cooling effect results from the water component's evaporation from the skin.

The composition of Galen's cold cream has changed in modern formulations, with mineral oil replacing the olive oil. However, the basic concept of cold cream as an oil-water emulsion remains the same. Cold cream is widely used around the world to moisturise the skin, as in a shaving cream or as a makeup remover.

### Magistral preparations

Galen's compounded formulations would be classified as Magistral preparations today and is possibly one of the earliest formulations for Magistral preparations. For this reason, we consider that Galen might serve as one of the earliest forerunners of this modern pharmaceutical method of prescribing topical preparations.

Galen's cold cream is also an example of his significant influence on medicine and how a cosmetic he created has been in widespread use centuries after his time. Today, cold cream can be found in households across the world, an everlasting legacy to Galen, one of medicine's founding fathers.



Figure 2

## References

- 1 Lipsker D, Nwabudike LC, Parish LC, Hoenig LJ. *Ceratum Galeni*: an old eponym honoring Galen and his cold cream. *Clin dermatol*. 2023;41:735-737.
- 2 de Chauliac G. *La Grande Chirurgie, Composee en L'An 1363*. Paris, France: Ancienne Libraire Germer Ballaiere Et Cie;1890: 430.
- 3 Galen. *Writings on Health Thrasylbulus and Health (De sanitate tuenda)*. Singer PN (trans). Cambridge, United Kingdom: Cambridge University Press; 2023:398-399.

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**Figure 1:** *Galen-Experimenter in Compounding (131-201 AD)*. Oil on canvas painting by Robert Thom and part of *A History of Pharmacy in Pictures* launched in 1957 and commissioned by Parke, Davis and Company, Detroit, MI. (Public Domain)

**Figure 2:** 19<sup>th</sup> century apothecary jar with the words "Cerat Galeni" appearing on it. From Paris, France, white porcelain. (Public Domain)



EUROPEAN  
ACADEMY OF  
DERMATOLOGY &  
VENEREOLGY

## Calendar of Events

### 2024

#### 37<sup>th</sup> IUSTI Europe Congress

11–14 September 2024 | Zagreb, Croatia

[Continue reading >](#)

#### Pruritus Symposium

20–21 September 2024 | Münster, Germany

[Continue reading >](#)

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

25–28 September 2024 | Amsterdam, Netherlands

[Continue reading >](#)

#### UEMS European Board of Dermato-Venereology Diploma (EBDVD) Examination

4 October 2024 | Frankfurt, Germany and Remote online

[Continue reading >](#)

#### GUF 2024 GA<sup>2</sup>LEN Global Urticaria Forum

4–5 December 2024 | Berlin, Germany

[Continue reading >](#)

#### 10<sup>th</sup> International Congress, Psoriasis: from Gene to Clinic

5–7 December 2024 | London, England

[Continue reading >](#)

#### Urticaria 2024

6 December 2024 | Berlin, Germany

[Continue reading >](#)

### 2025

#### 14<sup>th</sup> Conference of the European Hidradenitis Suppurativa Foundation (EHSF) e.V.

12–14 February 2025 | Vilnius, Lithuania

#### EADV Symposium

22–24 May 2025 | Prague, Czech Republic

#### 34<sup>th</sup> EADV Congress

17–20 September 2025 | Paris, France

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