

Join us in Prague for EADV Symposium 2025

A look at what awaits you

Page 4

Full-face transplantation

An interview with Prof
Bohdan Pomahac

Page 8

Dermato- venereology in the European Parliament

Advancing EADV advocacy

Page 21

EADV Global Health Fellowship

Second call for
applications

Page 22



A busy start to 2025

It has been a very busy start to 2025! EADV Leadership along with the members of the Dermato-venereology and Patient Advocacy Task Force visited the European institutions in Brussels, Belgium, in January with two important goals in mind.

Commitment to collaborate

The first was a series of successful meetings engaging with seven

Members of the European Parliament (MEPs), including the Chair and Vice-Chair of the Committee on Public Health (SANT) and the Coordinator in SANT of the European People's Party (leading political group in the European Parliament), as well as influential MEPs in health, environmental, employment and gender policies. We were thrilled that the MEPs expressed strong commitment to collaborate with EADV and

to advance key dermato-venereology priorities, including the awareness and regulation of sunbeds, the prevention and management of occupational skin diseases and the improvement in care for inflammatory skin conditions. Some MEPs featured our meetings on their social media, recognising the importance of dermato-venereology and signalling an opening for further collaboration.



A busy start to 2025

Through a partnership, EADV and IUSTI-EU will work together to enhance scientific exchange, develop joint educational initiatives, and raise awareness of STIs as a critical public health issue.

Furthering our advocacy efforts

The second (ongoing) goal is to define the priorities for the future of our EADV advocacy strategy by means of conducting a strategy workshop in partnership with our public affairs strategic partner, Acumen. Aligning with the 'Mission' of the new European Commission and leading groups in the European Parliament, the suggested focus areas include prevention, early detection and timely treatment of skin diseases, regulation and awareness of sunbeds and women's health. Additional topics for consideration are sexually transmitted infections (STIs), cardiovascular and mental health, rare diseases, AI and occupational skin diseases. We also had a successful exchange with the European Federation of Allergy (EFA) and GlobalSkin to align priorities and discuss partnership opportunities to better shape European and global policies on skin health. As we cannot do this alone, we will work closely with patient organisations and other stakeholders to build a broad coalition committed to improving dermatological and venereological health worldwide.

Enhancing scientific exchange

The annual European Dermatology Forum meeting also took place in January in Montreux, Switzerland, where the Executive Committee hosted its first meeting of the year. Discussions

continued with the newly formed European Guidelines Alliance Board (EGAB), composed of members from both EDF and EADV Leadership, where a consultancy agreement was finalised with the scope of publication strategies, copyright considerations and other relevant items relating to the combined production of evidence-based medicine guidelines in the fields of dermatology and venereology. During our stay in Montreux and continuing our external association relations, an agreement between the Academy and IUSTI was signed. This agreement marks a significant step in strengthening collaboration between the two organisations, with a shared commitment to advancing continuous medical education, fostering research and advocating for improved prevention, care and recognition of STIs across Europe and beyond. Through this partnership, EADV and IUSTI-EU will work together to enhance scientific exchange, develop joint educational initiatives and raise awareness of STIs as a critical public health issue.

EADV Leadership Development Programme

I am also delighted to confirm the excellent results of the reinstating of the EADV Leadership Development Programme (LDP) application process. Thirty successful EADV Member candidates will take part in this unique opportunity to acquire the

skills that differentiate a successful leader, and which are becoming essential in a challenging and fast-changing world. The EADV Leadership Development Programme is an intense one-year programme oriented towards developing the foundation skills of emotional intelligence. The first cohort was in Lugano at the end of March. Thank you to everyone involved.

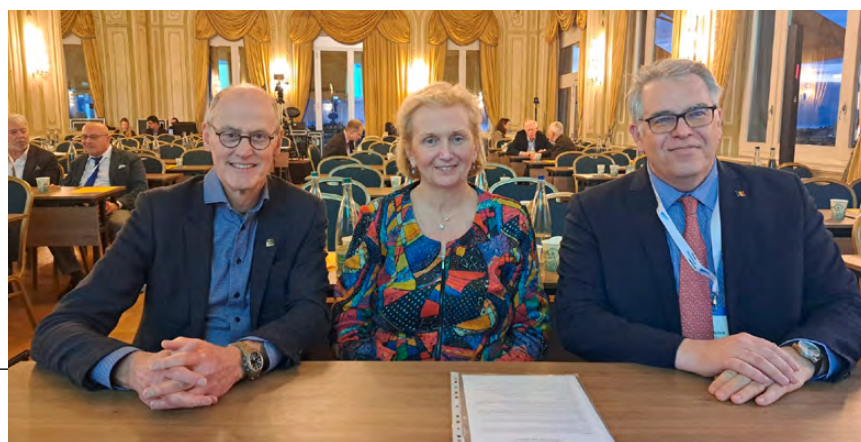
In January, I had the pleasant experience of travelling to Jaipur, India, where I attended the Indian Association of Dermatologists, Venereologists and Leprologists (IADVL) Dermacon 2025 (see page 15). This was the first time that the Academy was represented in India at its National Conference. We have 137 Indian members within EADV. I was lucky enough to share this experience with EADV's Secretary General and Treasurer.



Branka Marinović

EADV President
(2024–2026)

EADV Treasurer Prof Menno de Rie,
EADV President Branka Marinovic and
IUSTI President Prof Sorin Tiplica



In this issue

A busy start to 2025	1
What can you look forward to in Prague, Czechia	4
Spring, when Prague is most beautiful	6
The 'many faces' of full-face transplantation	8
Using art to describe dermatological conditions	10
Views from a social media reporter	12
EADV around the world	14
Enrique Rodriguez-Lomba's scholarship journey	16
Contact hypersensitivity reactions	18
Alert on a false health claim	20
Raising dermato-venereology in the European Parliament (EP)	21
EADV Global Health Fellowship	22
Meet the EADV Board	26
History of Dermatology: Campbell Grieg De Morgan	31
Skin@the market	32
Skin@School	33
Face-to-face activities	34
Calendar of Events	36

Editorial

International cooperation in dermatology

Our annual educational activities, the EADV (Spring) Symposium and the EADV Congress, emphasise the importance of cooperation between institutions and researchers globally to advance knowledge and treatment options in our field(s). Sharing of data, best practices and discussing advancements helps to address global health challenges and foster innovation in dermato-venereological treatment, as can be seen on pages 14 and 15 of this edition of EADV News.

In addition to our annual educational activities, EADV facilitates research partnerships and educa-

tional exchanges; including our annual honours and awards as well as our international face-to-face activities that promote sharing of knowledge and advancements in dermatological science. Other examples of international cooperation can be found in the European health initiatives plan to address skin health disparities, advocating for better access to dermatological care, especially in low-resource settings. Efforts to create guidelines and standards for the diagnosis and treatment of skin conditions Europe- and worldwide help ensure consistent care and improve patient outcomes. The rise

of teledermatology has enabled dermatologists from different countries to collaborate more effectively, providing remote consultations and sharing expertise with practitioners in underserved areas, including the EU initiative of the European Reference Networks for Rare Skin Diseases. International cooperation also involves raising awareness about skin diseases, promoting public health campaigns and promoting education on skin cancer prevention, particularly in regions with high incidence rates. Finally, collaborations should take into account cultural differences in the perception of skin diseases, >

> leading to more tailored and effective health interventions. For this latter target, international exchange visits offer a useful instrument.

I look forward to seeing you at our next Symposium in Prague, Czechia, to discuss how we can intensify our international presence and cooperation, especially when we feel that humanity and mutual understanding might be in danger in our world.



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

Editor

What can you look forward to in Prague, Czechia

The three-day programme provides participants with the chance to delve into scientific content centered on viral infections and emerging targeted therapies for inflammatory diseases.

Additionally, “What’s New” sessions will highlight the latest advancements across key areas of dermatology and venereology, including skin cancer, psoriasis, sexually transmitted infections (STIs), hidradenitis suppurativa and lupus. Expanded “Interactive

Clinical Cases” sessions will enhance audience engagement through active participation, while “Free Communications” sessions will showcase top-rated abstracts from a wide range of submissions.

What’s new

25
sessions

- Melanoma
- Keratinocytic skin cancer
- Adverse anti-cancer drug reactions
- Hidradenitis suppurativa
- Emergencies in dermatology
- Regenerative medicine and aesthetics
- Psoriasis
- Genodermatoses
- STI’s
- Lupus erythematosus

Interactive clinical cases

- Dermoscopy
- Clinical-pathological correlations
- Hair and nail disorders
- Aesthetic dermatology
- Paediatric dermatology

Focus on

- New targeted treatment
- Viral infections

101
speakers



PRAGUE
22-24 MAY 2025

Spring, when Prague is most beautiful

It is said that Prague - the 'Mother of Cities' and the 'Pearl of Central Europe' – is at its most beautiful in May so it is fortuitous that the EADV Spring Symposium 2025 is taking place in our stunning city on 22 – 24 May 2025. Come and explore its delights!

A city as old as time

The city was allegedly founded on 2 November 723, according to the calendar of Daniel Adam of Veleslavín (1546–1599). However, archaeological excavations have documented an existence of a settlement in the area from more than 7,000 years ago.

Why has the capital of Czechia remained relevant among other European cities for so long? Its most significant development, which essentially continues to this day, happened in the 14th Century, during the reign of King Charles IV, the king of Germany, Lombardy and Burgundy, the Margrave of Moravia, the Count of Luxembourg, the Emperor of the Holy Roman Empire and among many other titles, the 11th ruler in our country's history. Owing to his illustrious leadership, Prague expanded far beyond the old city walls. To name one of his many great accomplishments, the most famous bridge in the city carries his name and allows both locals and visitors to cross the Vltava River from Lesser Town to the historical Old Town. The bridge has stood strong through intense floods and wartime and symbolises the tenacity of the Czech people.

A great legacy

King Charles also left us with another great legacy, in his own words in the Foundation Charter:

"And thus that our loyal people of the kingdom, who crave with unceasing hunger for the fruit of learning, should not need to beg for alms in foreign lands, but should find in our kingdom a table laid for feasting, and that those who are distinguished by their acuity, both innate and given from above, should become educated through the acquisition of knowledge, and should no longer be forced to wander around the world, turn to foreign nations, or to beg in alien parts in order to quench their craving, now considering such wandering useless, but that they should instead consider it their honour to be able to invite others from foreign lands and let them partake of that delectable fragrance and great gratitude ... At this Studium generale there will be doctors, masters and pupils of all faculties, to whom we promise excellent goods, and to those whom we consider deserving thereof, we shall grant royal gifts."

An old seat of learning

Perhaps Charles' most important legacy is the University that carries. Founded on 7 April 1348, it was then the first university north of the Alps and east of Paris. Today, we know it as Charles University and it ranks among the oldest European universities with its 667 years of existence. Since then, Prague has been considered to be among the most significant

centres of knowledge and place for academics in Europe. Does this prominence also apply to dermato-venereology?

Welcoming dermato-venereology

In fact, yes. In the 19th Century, the first dermatological and venereological institutions were established in the city, in close cooperation with Vienna, Budapest and Krakow, operating with a significant Austro-German influence. As you may already know, the German Dermatological Society was founded as early as 1889. But were you aware that it was, in fact, founded in the centre of Prague, in 'Na Příkopě' street, in the former headquarters of the *Deutsches Kasino* society? The building was expropriated in 1945 after World War II and is now better known as 'Slovanský dům' (Slavonic House).

The birth of a society

Did the Czech and Slovak dermato-venereologists fade into obscurity following the historic events? Frankly, anything but. The Austro-Hungarian Empire, of which both countries were part of for 300 years, dissolved in 1918, but within a year, a new scientific journal in Czech and Slovak languages was being published, now over 105 years old and still going strong. The subsequently established society tied to the publication is also approaching its 103rd year of activity. After the separation of Czechoslovakia, the group also split into two separate entities. The Czech branch, with over 900 members – essentially all Czech dermatologists – is led by Prof Petr Arenberger.



I am proud to have been elected by the Czech dermato-venereologists in EADV to represent the Czech Republic for a second term and I take this opportunity, in honour of the position granted upon me, to invite you to our symposium in Prague this coming May. As per King Charles' words: *"...that they should instead consider it their honour to be able to invite others from foreign lands and let them partake of that delectable fragrance and great gratitude."*

An ever-evolving city

For attendees who have already visited Prague privately or during the EADV Congresses in 2002 and 2012 or passed through while headed to the EADV Spring Symposium in Karlovy Vary (Carlsbad) in 2011, be assured that you definitely have not yet fully experienced Prague. The city continues to develop and offer even more novel experiences. Even the old landmarks are receiving new 'facelifts'; like the architectural gem 'Masaryčka' by world-renowned Zaha Hadid Architects, the National Museum, the over-a-century-old icon of the Wenceslas Square, the sombre picture of which left you perhaps a bit underwhelmed on your last visit, has had its facade restored to its original

radiant light sandstone beige. Just that is reason enough to come back to Prague!

Looking forward to the symposium

Prague's beauty aside, let us take a brief look at the 2025 symposium itself. We will have the honour of hosting numerous exceptional speakers at the Prague Congress Centre. The official programme has yet to be announced, but to give you a sneak peek, you will get to learn the intricacies of a face transplant surgery first-hand from the person who perfected the procedure and performed the first full-face transplant in the USA, Prof Bohdan Pomahac from Yale School of Medicine, US, originally from the Czech Republic.

You may also look forward to seeing him on CNN Prima News TV where I invited him to my medical talk show focusing on various healthcare topics. The aim of the programme is to improve public awareness and health literacy among the general population,

and, of course, serves as a promotion for the 3rd Faculty of Medicine at Charles University, of which I am the Vice-Dean as well as for the Královské Vinohrady University Hospital, where I work and, naturally, for general medicine as a professional field, particularly dermato-venereology.

So hopefully, should someone ask "Are you headed to Prague to attend the 2025 EADV Spring Symposium?" the answer will be "I'll be there!"



Prof Monika Arenbergerová, MD, PhD

EADV Board Member
Czech Republic



PRAGUE
22-24 MAY 2025

eadv.org/symposium



The 'many faces' of full-face transplantation

EADV News had the honour to talk with Prof Bohdan Pomahac from the Yale

School of Medicine, US, ahead of his presentation at our 2025 EADV Symposium in his home country of Czechia in May 2025. During the discussion, we looked at how the field of face transplants has evolved since his first partial transplant and the dermatological considerations that need to be considered before, during and after the process.

How has the field of face transplants evolved since your first partial transplant in 2009, and what are the latest advancements dermatologists should be aware of?

The field of face transplantation has seen remarkable advancements. More than 50 patients worldwide have undergone face transplants, with many teams now having significant experience in these procedures. Surgical techniques and patient management have both improved and there is now a well-documented blueprint for establishing face and hand transplant programmes. Dermatologists play an integral role in patient care, particularly in diagnosing and managing rejection. Their expertise in skin and mucosal disorders is vital, as they assist with clinical exams, histological analyses and differentiating other skin conditions. Advances in topical treatments have also contributed to managing rejection more effectively.

What role does skin play in face transplants and are there specific dermatologic challenges?

Since Dr Joe Murray's groundbreaking work in the 1950s, it has been clear that skin is the most immunogenic tissue in the human body. In the 1980s and 1990s, research revealed that composite tissues perfused by axial blood flow experience less rejection than individual tissue grafts. This discovery laid the foundation for vascularised composite allotransplantation (VCA), including face and hand transplants. However, skin remains a primary target for rejection, alongside mucosa and blood vessel endothelium. The accessibility of the skin allows for early diagnosis and intervention, reducing the risk of chronic rejection compared to concealed solid organs. Survival outcomes for face transplants are currently the best among all transplanted organs.

How do face transplants affect skin integrity and overall dermatologic health post-surgery?

The primary challenge with face transplantation is the need for life-long immunosuppression, which increases the risk of infections and malignancies. Dermatologists play a crucial role in managing these conditions. Interestingly, face transplant patients seem to have a lower incidence of skin cancer compared to solid organ transplant patients. However, they might be prone to rare and difficult-to-treat skin infections. Despite these challenges, most patients experience good outcomes and report no regrets about undergoing the procedure.

What should dermatologists consider when managing skin rejection or complications in transplant recipients?

Skin rejection manifests differently depending on the timeline. Early rejections within the first year are dramatic, characterised by swelling and diffuse redness. Later rejections are subtler, often discovered incidentally or through biopsies of minor skin lesions. This subtlety poses a challenge for clinicians, underscoring the importance of timely and accurate diagnoses. Dermatologists are essential partners in detecting and treating these complications promptly.

How are long-term cosmetic and dermatologic outcomes managed for face transplant patients?

Cosmetic outcomes are a critical part of face transplantation. A well-known principle in reconstructive surgery is that every reconstructive procedure ends as an aesthetic one. Over time, tissue sagging due to gravity and postoperative swelling resolution often requires additional tightening procedures, with about two-thirds of patients needing facelift-type surgeries within the first two years post-transplant. Matching skin tone is another critical factor, beginning with donor selection. While tone matching is straightforward for Caucasian patients, it presents significant challenges for African American patients due to the diversity of skin tones, highlighting an area requiring further focus and experience.

Are there specific dermatologic treatments or skincare routines recommended for face transplant patients?

Topical treatments, such as the combination of tacrolimus and steroids, have been effective in managing skin rejection. These therapies complement systemic immunosuppressants,

which remain essential. Given the accessibility of skin for examination, developing topical immunosuppressive therapies to reduce reliance on systemic treatments is a promising area for future research.

How does a transplanted face affect susceptibility to conditions like acne, rosacea or sun damage?

Transplanted faces are susceptible to various skin conditions. For instance, our team documented a case of rosacea on a transplanted face that we believe was transferred from the donor. Physical, chemical and mechanical irritants can also trigger rejection, making it crucial for patients to avoid sun exposure and prevent sunburn. Some skin conditions may even transfer from the donor, though immunosuppressive medications often prevent their manifestation.

What dermatologic issues are most common post-transplant and how do you collaborate with dermatologists?

Rejection management and the identification of skin cancer are the two primary areas of collaboration with dermatologists. Many dermatologic

conditions fall outside the expertise of plastic surgeons, necessitating the involvement of specialists. We are fortunate to work with dermatologists trained in both dermatology and dermatopathology, allowing them to integrate histological and clinical insights. These collaborations have also led to groundbreaking research in human physiology.

What role does the skin microbiome play in face transplants and are there interventions to optimise healing and reduce rejection risks?

The role of the skin microbiome in face transplants is an emerging area of interest. We currently do not fully understand how the microbiome of the skin or oral cavity influences rejection processes. Exploring these dynamics is an exciting avenue for future research that may uncover new ways to optimise healing and minimise rejection risks.

Plenary lecture
22 May 2025
from 17.30 to 18.30

followed by a
networking
symposium

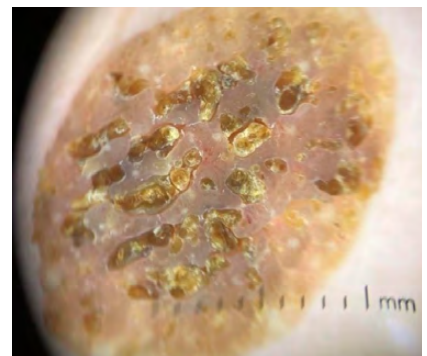


Visual Literacy Course: Using art to describe dermatological conditions

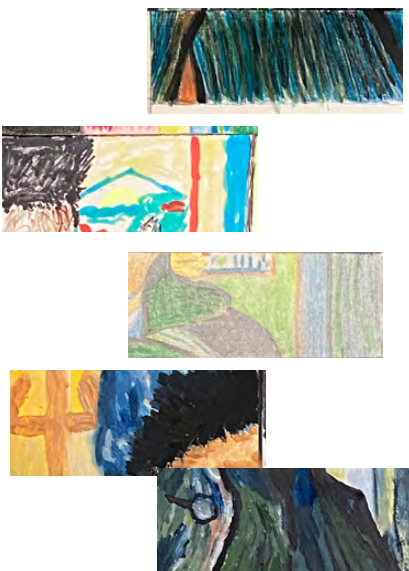
1a



Imagine trying to describe a lesion to a colleague over the phone: "It is yellow and brown and oval. It is about 20mm across and the surface has short channels with yellow brown material in them. What is it?" Then use your normal dermatological terms. "It is yellow brown in colour, well circumscribed, stucco and has clumps of keratin on the surface and buried as small islands within the substance of the lesion". Your colleague may get it first time around, but second time they will know it's a seborrhoeic keratosis.



2



1a & 1b This classic self-portrait of Vincent van Gogh (1a) was cut into 12 parts and a part distributed to each of 12 registrants. Each part alone was semi-abstract, often not providing a coherent image of an object. The participants then copied their part with a range of art materials available. Assembling these parts at the end of the exercise created an image (1b) demonstrating the different styles of observation and graphic literacy in the group.

This is the difference between looking and describing with a naïve vocabulary purely of descriptive terms, as opposed to the dermatological vocabulary which is often employed backwards – after we have made the diagnosis and to highlight the features we know to be characteristic of the lesion. The first requires a degree of concentration and scrutiny that can be missing for the second, where our intuitive powers of clinical diagnosis take over without being consciously processed.

An ongoing evolution

For the fourth Visual Literacy Course run by the EADV, 20 trainees and consultants from 10 different countries of Europe, Australia, Canada and China took part. Started in 2018 by Chris Griffiths, Sarah Walsh and Helen Young, the course has evolved to see a range of artists, art historians and other specialists contributing to the three-day programme at the

Courtauld Institute, London (UK). The concept of Visual Literacy with respect to dermatological learning has evolved in North America and Europe over the past 20 years. Using the examination of art as the vehicle for observation and description, authors have demonstrated the value of the skills learned when transferred to the matter of examining human skin and its pathology. If you can look at and describe complex paintings to effectively convey their content to another person, you should do well in dermatology, the theory goes.

Naming dermatological diagnoses

Hosted by Anne Puetz and her team at the Courtauld, we settled into an afternoon of Monet and scenes of southern France, offset by paintings of 19th Century London bathed in surreal multichrome smog. Awareness of colour, depth of field and light provided a hook to the session of naming dermatological diagnoses based on the descriptors of the art historian.



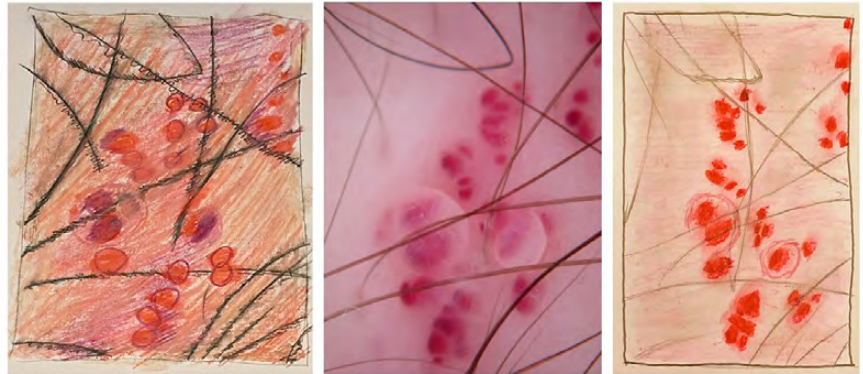
Sarah Walsh conducted a range of engaging and revealing exercises throughout the course using images of pathology and how we see, describe and analyse them visually.

Avoiding shorthand

A third limb of the course was to employ the "copying tool". An image is projected on a screen and you transfer what you see to paper. The principle being that if you want to copy something, you need to look closely at it. If it is something you recognise, then part of the copying process is automatic based on your generic version of the subject. This shorthand is like using dermatological vocabulary to describe something. We attempted to avoid this by breaking recognisable items down into abstract fractions and each registrant copying their fraction. When reassembling the parts, the difference in visual and representation process amongst people is striking.

The other abstract image dermatologists are familiar with is dermoscopy

"The course was very useful to de- and reconstruct our visual approach on dermatological daily practice in macroscopic and microscopic diagnoses.... It was a wonderful location and the interdisciplinary approach between art and dermatology, the theoretical and practical trainings were so useful to inspire to integrate regular self-training in visual literacy at home together with my colleagues." - **participant feedback.**



3

and a workshop of painting dermoscopic images produced stunning results.

The nature of printing

The wonderful resources available at the Courtauld meant that we had additional privileges of spending time in the print room to appreciate the quality of paper (remember vellum and skin) and the nature of printing. Then the restoration laboratory, where imaging tools, as only found in the best dermatological laboratories, were available for determining the detail of surface and pigment granules on 17th Century painting when ground up lapis lazuli was used to create ultramarine.

At the end of the course, it felt like visual literacy had been examined from many angles, revealing the additional dimensions of enjoyment and enthusiasm. Dermatologists love using their eyes, looking, analysing and communicating.



Dr David de Berker

University Hospitals Bristol
NHS Foundation Trust

Suggested reading

1. Matthews R, Wray A, Walsh S, Griffiths CEM, Young H. The Art of Observation: Visual Literacy for Dermatologists. *J Eur Acad Dermatol Venereol* 2021; 35: e809-e811
2. Griffin LL, Chiang NYZ, Tomlin H, Young HS, Griffiths CEM. A visual literacy course for dermatology trainees. *Br J Dermatol*. 2017; 177: 310-311.
3. Braverman IM. To see or not to see: how visual training can improve observational skills. *Clin Dermatol* 2011; 29:343-6
4. Naghshineh S, Hafler JP, Miller AR et al. Formal art observation training improves medical students' visual diagnostic skills. *J Gen Intern Med* 2008; 23:991-7
5. Dolev JC, Friedlaender LK, Braverman IM. Use of fine art to enhance visual diagnostic skills. *JAMA* 2001; 286:1020-1

1b



2 Normal dermoscopic image of seborrheic keratosis

3 The central image is a dermoscopic image of a lymphangioma. Either side is the illustration created by 2 participants.



I was privileged to have the opportunity to attend this year's EADV Congress as a social media reporter. This was an enlightening experience that showcased the intersection between clinical dermatology, scientific innovation and the ever-evolving landscape of social media.

Reaching a wider audience

My role involved reporting on the latest advancements in the field, sharing key insights gleaned from a wide array of talks and engaging with the conference audience in real-time. It was exciting to amplify the facets of the conference that interested me most to a wider audience that were not able to attend the congress. Attending as a social media reporter

not only allowed me to interact with some of the most distinguished professors from each field, but also meet fellow reporters from across the globe, each with their own dynamic and engaging style.

Addressing key topics

Before the conference began, the social media team immersed themselves in the Congress schedule,

Views from a

making sure that each key topic was covered and aligned with our own clinical interests. We identified key sessions and speakers to prioritise, covering a spectrum of sessions ranging from general and paediatric dermatology through to cutaneous malignancy and aesthetic medicine. We were also able to network with the amazing EADV team to gain access to key speakers and make sure that we were representing the Congress in the most effective way across multiple platforms.

Creating content

Once the conference started, we had a whirlwind tour of the venue with the Congress team (and a few photo-shoots along the way) before getting stuck into our reporting duties. After meeting all our fantastic fellow reporters, we got busy creating live coverage, attending every lecture we could and capturing content in a digestible format. My clinical interests lie in oncodermatology and the schedule in this field was outstanding, with multiple sessions dedicated to diagnosis and dermoscopy, treatment and the latest scientific advances in a wide spectrum of skin tumours.

A variety of channels

I personally chose LinkedIn as my platform of choice, as I felt that I could share the key takeaways from each session in a succinct and engaging way. As most of my network on LinkedIn are fellow dermatologists or medical professionals this provided a more professional space to delve deeper into the science and I was surprised to see that my posts had over 25,000

social media reporter

views in the week following the Congress!

Other reporters used X (formerly Twitter) to post fast-paced updates in real time or TikTok to post short insightful videos. Of course, Instagram remained the most utilised platform, and I loved seeing the imaginative posts, stories and reels created by the reporter team. Instagram provides a highly visual and interactive platform and produced significant engagement through the EADV channels to a diverse audience including dermatologists, medical students, industry and the public.

First-hand accounts

One of the key roles of the social media reporters was to interview experts in each field, and it was enlightening to get the key points from each speaker even when we had been unable to attend a session. These conversations provided us with valuable insights and perspectives from leaders in each field.

One of the biggest challenges as a reporter was time management, making sure we created valuable content whilst also being present in each session and learning as much as possible. It was particularly vital to remain flexible to be able to work around the schedule of each speaker and secure a great interview.

A highly rewarding experience

Overall, my experience as a social media reporter at the Congress was highly rewarding and allowed me to merge my passions for digital media and evidence-based healthcare. Between myself and my fellow reporters it was amazing to see how the wealth of knowledge presented in Amsterdam could be disseminated widely to many hundreds of thousands beyond the 17,000 that were able to join us at the RAI congress centre.

But most rewarding of all was to meet the EADV team that was able to make this all happen, as well as new friends



and colleagues from the Netherlands, Lugano, Belgium, Poland, Mexico, Brazil, Slovakia, Romania and everywhere else!

Can't wait to see you all at EADV Paris 2025



Dr Jonathan Kentley
Consultant Dermatologist,
Chelsea and Westminster Hospital

EADV CONGRESS

Call for
Social Media Reporters
opening soon

MORE INFO ON
eadv.org/congress

EADV goes to Dubai – MEIDAM Congress

The Medical Excellence in Dermatology and Aesthetic Medicine (MEIDAM) Congress takes place annually in Dubai and brings together dermatologists from the Middle East and Africa as well as additional speakers and registrants from other regions – last year, that included EADV. The three-day meeting featured sessions on many topics as well as society sessions.

Prof Menno de Rie, EADV Treasurer, volunteered to lead the EADV speaker team. He was joined by the Chair of EADV's Communications Committee, Prof Dedee Murrell, EADV Board Member from Poland Prof Aleksandra Lesiak and Dr Margo Gkini, from London.

The EADV session covered diverse topics related to psychodermatology (Prof de Rie), genetic skin diseases: Epidermolysis Bullosa (Prof Murrell) and ichthyosis (Prof Lesiak) and atopic dermatitis and JAK inhibitors (Dr Gkini). Dr Anastasia Therianou from the EADV Communications Committee also registered and presented two talks on alopecias.



EADV goes to India – Dermacon Congress

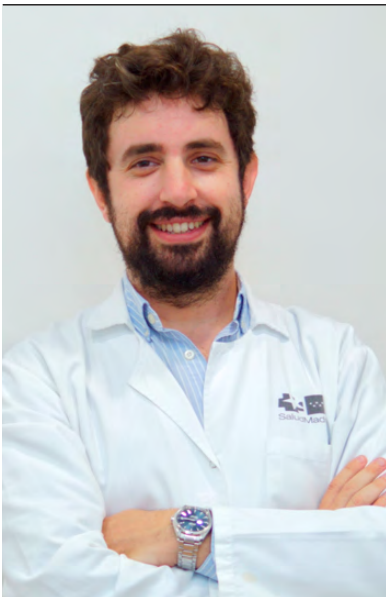
Dermacon 2025 was the 53rd annual conference of the Indian Association of Dermatologists, Venereologists and Leprologists (IADVL), which took place on February 6-9, 2025 in Jaipur.



EADV President Professor Branka Marinovic, Treasurer Professor Menno de Rie, and Secretary General Professor Carmen Salavastru attended IADVL, where they discussed collaboration with IADVL Leadership between both associations and delivered lectures during the conference.

Additionally, EADV News Editor, Prof Dr Christos C. Zouboulis, delivered the keynote lecture of the Conference and will contribute as an international board member to the IADVL journals, representing the EADV.





EADV Scholarships

EADV News talks with Enrique Rodriguez-Lomba about his scholarship journey

In each edition of EADV News, we will be talking to scholarship winners about what made them apply for an EADV scholarship, what winning means to them and what advice they would give to others.

We start with Enrique Rodriguez-Lomba, a dermatologist from Spain.

What inspired you to apply for an EADV scholarship?

I was motivated to apply for an EADV scholarship for the first time in 2018 because of the opportunity it presented to expand my knowledge in dermatology and venereology, to improve my career progression and to have the possibility to interact and connect with international experts from all around the world in the annual congresses. Back then, I was honoured to receive the John Stratigos Memorial Scholarship for the EADV Symposium in Montenegro, and the experience encouraged me to apply a few years later both for the AAD-EADV scholarship and the Lecturer of the Year Award (now Best Researcher Award).

What was the most challenging part of the application process?

Ensuring that my application stood out in a competitive pool of talented candidates from all around the world that grows bigger every year. Every scholarship applicant is required to report a career resume including a list

of national and international publications and congress contributions (oral presentations and posters) that may take some time to compile.

How has this scholarship changed your life or academic journey?

I can say that the EADV scholarship has had a significant impact on my academic trajectory. As a young dermatology resident, the scholarships

opened doors to international collaborations, allowed me to attend international dermatology conferences in countries I had not visited, and gave me the opportunity to connect me with the EADV inner structure as a junior member of the Honours and Awards Committee. Now, at the other end of the table, I expect to give other young members of the Academy as much as I received back then.

What does receiving this scholarship mean to you personally?

Receiving the EADV scholarships, both John Stratigos and Lecturer of the Year Award were a huge honour for me. It validated my dedication to dermatology and became a strong motivation to keep working in this





field. Also, it gave me the chance to establish a deeper connection with fellow researchers, some of whom I can call friends nowadays.

What advice would you give to students aspiring to win a similar scholarship?

My advice would be to encourage all members who meet the requirements to apply for the scholarships, even if they do not have an outstanding profile. Do not be discouraged if you are not selected for a specific scholarship at certain point. Keep trying and the results of hard work and dedication will come sooner or later. The experience will definitely be worth it.

How does this scholarship align with your long-term goals?

The EADV scholarship directly aligns with my long-term goals of advancing research in dermatology and venereology, improving clinical practices and contributing to global initiatives aimed at enhancing patient care. The



knowledge and connections I have gained will allow me to take a more active role in shaping the future of dermatology.

Now that you are member of the Honours and Awards Committee, what are your aspirations to achieve and advocate for?

As a member of the Honours and Awards Committee, I aspire to ensure that opportunities are accessible to all



deserving candidates, regardless of background or geographical location.

I also aim to support initiatives that encourage the growth of early-career professionals and foster a global network of dermatology experts.

Discovering the pathophysiology and clinical presentations of contact hypersensitivity reactions



A Contact Dermatitis residents course was held on 27–29 November 2024 within the framework of the Hospital and University Centre of Coimbra, Portugal, with an expert panel of contact dermatitis specialists including Margarida Gonçalo, Ana Giménez-Arnau, Thomas Rustemeyer, Suzana Ljubojevic and Olivier Aerts.

The course brought together residents from different European countries.

The comprehensive course on contact dermatitis aimed to make dermatology residents aware of the pathophysiology and clinical presentations of contact hypersensitivity reactions, mostly allergic contact dermatitis, photoallergic contact dermatitis and immediate contact reactions, and to train them on the best techniques to perform etiological diagnoses. Skin testing was

covered in detail with particular emphasis on the methodology of patch testing, the reading and interpretation of positive reactions and patient orientation.

Attendees also had the opportunity to discuss the main allergens that are part of the European Baseline series, such as why low molecular weight substances cause cutaneous reactions (mainly eczema) and how to manage the more frequent

localisations of contact reactions (facial dermatitis, hand eczema, generalized dermatitis), from the diagnosis, skin testing and treatment.

The course also gave participants hands-on experience with regular patients from a local clinic observed and assessed as examples of how to collect a history, choose allergens to test, apart from the European Baseline series, read and interpret

skin test reactions and how to advise the patient concerning allergen avoidance.

Residents were requested to bring a case report to share and the best presentations were awarded a prize. The session not only offered a significant learning opportunity but also the chance for participants to network, meet residents from different settings and share cases with specialists on contact dermatitis.

"The EADV course on Contact Dermatitis was an incredible opportunity for me to learn from some of the leading experts in the field. The course provided a deep dive into the latest research, diagnostic techniques and treatment approaches, allowing me to expand my understanding of contact dermatitis. I gained valuable knowledge, practical tips and expert insights that will undoubtedly help me in the future."

Nika Juriševič Dolinar,

Resident at University Medical Centre Ljubljana, Slovenia.



"Does anyone here usually manage contact dermatitis or have experience with patch testing?" No one raised their hand. This is how our course began, with the unsettling realisation that this topic is too often relegated to allergologists.

However, the specialists hosting the course were neither shocked nor irritated by our lack of experience. Instead, they did their best to convey their passion for

the subject, focusing on a methodical and practical approach to caring for patients with contact dermatitis, rather than simply imparting knowledge. I was pleasantly surprised and returned home enriched by their insights, as well as by the clinical cases presented by my fellow residents...and of course, by the beautiful city of Coimbra."

Giuseppe Milito,

Resident at Modena and Reggio Emilia University, Italy.

Alert on a false health claim: There are no authorised cerebral effects of cosmetics

Some cosmetic providers claim that the application of their cosmetic products to the skin can have direct effects on the nervous system and brain. Therefore, certain manufacturers even claim that their products could have effects on psyche, wellbeing, sleep, mood, depression, anxiety and more. The EADV's Psychodermatology Task Force wishes to alert authorities, consumers and healthcare professionals to this worrying trend and fake messaging.



The study of the relationship between the skin and the nervous system, or between the skin and the psyche, is a fascinating and rapidly expanding field of research. We currently know that the psychological impact of skin disorders can be very significant, and that stress can aggravate these disorders. We also know that interactions between the skin and the nervous system are very close, and that skin properties can be modified by the nervous system. Finally, the use of cosmetics can potentially improve the quality of life of users to some extent, particularly in the case of skin diseases. We fully approve this kind of research and we are deeply involved.



It is very important to remember that cosmetics can only affect the skin, mucous membranes or skin appendages, according to international regulations. A cosmetic cannot therefore have a specific direct effect on the brain and therefore on the psyche. If this were the case, the product would have to be immediately withdrawn from the market, especially as this would represent a risk of inducing dependency. Otherwise, it should be considered as misleading advertising, and such advertising should be prohibited.



Signed by members of the task force:

Altunay Ilknur, dermatologist, Turkey

Balieva Flora, dermatologist, Norway

Bewley Anthony, dermatologist, United Kingdom

Brenaut Emilie, dermatologist, France

Chernyshov Pavel, dermatologist, Ukraine

Dalgard Florence, dermatologist, Sweden

Evers Andrea, psychologist, Netherlands

Ferreira Barbara, dermatologist, Portugal

Finlay Andrew, dermatologist, United Kingdom

Gieler Uwe, dermatologist, psychosomatic specialist, Germany

Gkini Maria-Angeliki, dermatologist, Greece

Jemec Gregor, dermatologist, Denmark

Kupfer Jörg, psychologist, Germany

Linder Michael Dennis, dermatologist, Italy

Marron Moya Servando, dermatologist, Spain

Misery Laurent, dermatologist, neuroscientist, France

Poot Françoise, dermatologist, psychotherapist, Belgium

Reich Adam, dermatologist, Poland

Sampogna Francesca, epidemiologist, Italy

Schneider Gudrun, psychosomatic specialist, Germany

Schut Christina, psychologist, Germany

Svensson Åke, dermatologist, Sweden

Szepietowski Jacek, dermatologist, Poland

Thompson Andrew, psychologist, United Kingdom

Titeca Géraldine, dermatologist, Belgium

Tomas Aragones Lucia, psychologist, Spain

Vulink Nienke, psychiatrist, Netherlands

Zalewska Anna, dermatologist, immunologist, Poland



Advocacy

Raising dermato-venereology in the European Parliament (EP)

On 14 January 2025, we successfully engaged with seven Members of the European Parliament (MEPs), including Chair and Vice-Chair of the Committee on Public Health (SANT), Coordinator in SANT of the European People's Party (leading political group in the EP) and influential MEPs in health, environmental, employment and gender policies.

The MEPs expressed strong commitment to collaborate with EADV to advance key dermato-venereology priorities, including awareness and regulation of sunbeds, prevention and management of occupational skin diseases and improved care for inflammatory skin conditions. Some of the MEPs present mentioned our meetings in their social media, recognising the importance of dermato-venereology and opening for further collaboration.



Second Call for Applications in 2025

The Project Proposal and Review committee (PPRC) is excited to announce the upcoming second call for applications for the Global Health Fellowship, scheduled for spring/summer 2025.

Following its successful launch in September 2024, this initiative provides specialist dermatologists with a unique opportunity to engage in humanitarian work with refugees or collaborate with dermatological centers in low- or middle-income countries (LMICs). The fellowship aligns with EADV's mission to enhance patient care, clinical management and research in dermato-venereology through hands-on experience in diverse global health settings.

The EADV Global Health Fellowship offers a tenure of two to three months. Financial support of up to 10,000 euros, covering a maximum of 1,000 euros for travel expenses and up to 9,000 euros for accommodation.

To be considered, applicants must be specialist dermatologists-venereologists, hold an active EADV membership and submit a comprehensive application form. Specific eligibility criteria may vary depending on the hosting locations.

Fellowship locations

The Global Health Fellowship Programme may be held at locations proposed by EADV, which are updated each year and available on the [EADV website](#). During the first call, the following fellowship locations were proposed:

- [Centre Hospitalier de Mayotte](#) (Mamoudzou, Mayotte)

Mayotte, a French overseas depart-

ment in the Mozambique Channel, has a population of approximately 400,000, including undocumented individuals from the Comoros archipelago. The island faces significant healthcare challenges, including leprosy, lupus, melanoma and chronic dermatological conditions. High UV intensity contributes to numerous neoplastic pathologies. The Centre Hospitalier de Mayotte is the island's only hospital, serving as a primary care facility with multiple departments. Dermatology services are integrated into the internal medicine/infectious disease unit, working closely with paediatricians and specialists. The hospital team collaborates weekly with medical teams from Madagascar and La Réunion. Due to socio-political tensions and the presence of large-scale migration, healthcare professionals must exercise caution during personal time and organise leisure activities in groups.

- [Mater Dei Hospital](#) (Msida, Malta)

Mater Dei Hospital is Malta's main tertiary referral centre for dermatology and venereology. The fellowship includes participation in two core medical activities:

- **Morning sessions** (8:00 – 13:00, Monday to Friday): Work at the Genito-Urinary (GU) Clinic, a leading sexual health referral service offering free and anonymous STI/HIV consultations.

- **Afternoon/evening and weekend sessions** (16:00 – 19:00, three days per week; one session on Saturday or Sunday): Work with the mobile outreach clinic (Reach-Out project), providing integrated healthcare services for hard-to-reach populations.

- [Regional Dermatology Training Center](#) (Moshi, Tanzania)

The Regional Dermatology Training Centre (RDTC) in Moshi, Tanzania, is a supra-regional training, research, and clinical centre specialising in skin disorders, leprosy and sexually transmitted infections. The centre collaborates with the World Health Organisation and other institutions to provide expert training and healthcare services. The fellowship at RDTC includes observing all clinical activities, including outpatient clinics, surgical procedures (Mohs surgery), dermatopathology and outreach clinics, as well as participating in teaching and training for dermatovenereology students, medical students and specialised tropical dermatology courses.

- [American University of Beirut Medical Center](#) (Beirut, Lebanon)

The American University of Beirut Medical Center (AUBMC) is one of the leading academic medical centers in the Middle East, known for its high standards in clinical care, research, and medical education. The fellowship provides hands-on experience in migrant health, teledermatology, and dermatovenereological research. Fellows will collaborate with the SSKAPP [Skin and sexually transmitted infections KAP (knowledge,

attitude and practice) survey and health promotion strategy using mobile and digital technologies in migrant population] project, supporting healthcare providers working with Amel Association International and UNHCR in Lebanon's refugee communities. Responsibilities include training local healthcare professionals, conducting teledermatology consultations, and supervising the implementation of the SSKAPP project. Fellows will also engage in research on skin diseases in refugees and underserved populations, contributing to data collection, analysis, and publication. Additionally, they will participate in a qualitative study on women's sexual and reproductive health, conducting in-depth interviews with healthcare providers..

First Fellowship Awardees

The first round of fellowships, launched in 2024, awarded **Amna Elyas** a placement at **Mater Dei Hospital in Malta** and **Ditte Marie Saunte** a placement at **Regional Dermatology Training Center in Moshi, Tanzania**.

Their experiences will serve as valuable insights for future fellows.



Amna Elyas

I am passionate about advancing global health dermatology, particularly in low-resource settings. With experience in Malawi, Sudan, and Ethiopia, and expertise in skin of color dermatology and psychodermatology, I seek to expand my skills and collaborate with international experts through the EADV Global Health Fellowship, enhancing my impact in underserved regions.

Ditte Marie Saunte

I was motivated to apply for the EADV Global Health Fellowship to expand my expertise in tropical dermatology and infectious diseases, particularly in underserved regions. With a background in mycology and a focus on antifungal-resistant dermatophytosis, I aim to enhance my clinical practice, contribute to global health initiatives, and collaborate with professionals in diverse settings to improve health outcomes.



Join the Global Health Initiative

The EADV Global Health Fellowship is a significant opportunity for specialist dermatologists to contribute to global health initiatives, gain invaluable experience, and advance their professional development. We encourage eligible EADV members to apply and become part of this impactful programme!

For detailed guidelines and application procedures, please visit the [EADV Global Health Fellowship webpage](#).

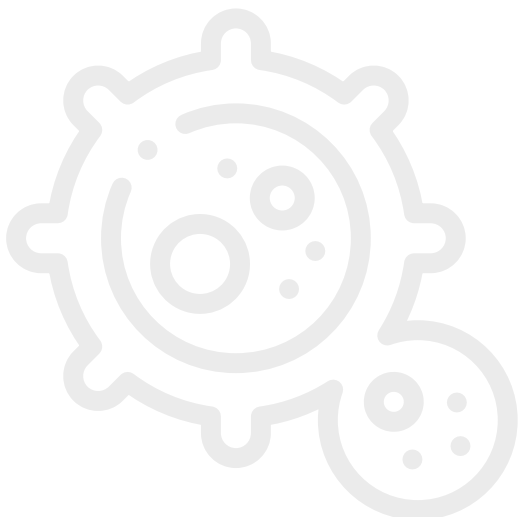




Mastering skin cancer diagnosis and treatment

An advanced online course for dermatologists

Skin cancer remains one of the most prevalent and challenging diseases in dermatology, requiring both precise diagnostic skills and expertise in managing complex cases.



WHY ATTEND?

To gain up-to-date theoretical and practical knowledge on the diagnosis, staging and treatment of skin cancers.

TOPICS

- **Keratinocyte carcinomas and UV exposure:** Epidemiology and the challenges of managing high-risk squamous cell carcinoma (SCC).
- **Melanoma:** Comprehensive coverage from early-stage management to advanced metastatic cases, including surgical approaches, staging, genetic predisposition and follow-up.
- **Rare skin cancers:** Merkel cell carcinoma, Kaposi sarcoma, adnexal tumours and angiosarcoma.
- **Cutaneous lymphomas:** Diagnosis, staging and treatment of T-cell and B-cell lymphomas, with a focus on advanced mycosis fungoides and Sézary syndrome.
- **Dermoscopy:** Practical insights into identifying basal cell carcinoma (BCC), actinic keratosis (AK), SCC and melanoma using dermoscopy.
- **Special populations:** Skin cancer management in organ transplant recipients (OTRs).

WHAT WILL YOU LEARN ?

- **To recognise skin cancers** based on clinical features and dermoscopy.
- **To determine staging and follow-up** for patients with melanoma, carcinomas, lymphomas and rare skin cancers.
- **To develop guiding treatment plans** using the latest international guidelines tailored to each patient's condition.

The programme places special emphasis on integrating practical skills with theoretical knowledge, ensuring that participants are well-prepared to navigate complex cases in their clinical practice.

HOW WILL YOU LEARN?

- **5.5 hours of theoretical content**, delivered in short, engaging lectures.
- **2.5 hours of quizzes**, with 27 tests designed to reinforce learning and assess progress.
- Accreditation with **8 CME credits**, supporting participants' professional development.

LED BY EXPERTS IN ONCO-DERMATOLOGY

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C. Assaf

M. Bagot

M. Battistella

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C. Ferrandiz-Pulido

A.M. Forsea

C. Gaudy-Marqueste

T. Jouary

A. Lallas

C. Lebbe

K. Mosterd

E. Nagore

P. Ortis Romero

J. Paoli

K. Peris

A. Pileri

I. Zalaudek

Why this course matters

This advanced training programme is a unique opportunity for dermatologists to refine their expertise in managing a wide spectrum of skin cancers.

By providing a strong foundation in diagnosis, staging and evidence-based treatments, the course empowers participants to improve patient outcomes and maintain the highest standard of care.



Meet the EADV Board



**Prof As
Monika Fida**
**Board representative
of Albania**
2024–2027

I completed my postgraduate studies in dermatology and venereology in Albania in 2004 and earned my PhD in 2013.

Currently, I serve as a professor at the University of Medicine of Tirana, Department of Dermatology, and as a Dermatologist at the University Hospital Center 'Mother Theresa' in Tirana, Albania.

I have pursued subspecialty trainings at prestigious institutions such as Harvard University (US), University of Vienna (Austria), University of Graz (Austria) and Institute of Dermatopathology IDI (Italy). These experiences have allowed me to gain invaluable knowledge, significantly shaping my expertise as both a dermatologist and a mentor to the next generations of dermatology residents.

I am a co-founder and board member of several local and regional associations, including the Albanian Society of Dermatology (since 2007) and the Albanian Society for Cosmetic & Aesthetic Dermatology - ASCAD (since 2020). Additionally, I actively contribute to the European dermatological community as a member of the EADV Dermatology for Cancer Patients Task Force (since 2021), EADV Laser Dermatology and Energy Based Devices (EDB) Task Force (since 2022), ex-Board Member of International Society of Dermatology (ISD) and member of ISD.

My academic contributions include over 60 publications and four books, and I have been an invited speaker at numerous international conferences.

Representing Albania as a Board Member of EADV is both an honour and a responsibility. I am committed to enhancing dermatological education and advancing clinical care through collaboration, research and knowledge sharing on a global scale. I am grateful for the opportunity to serve the dermatology community and would like to thank my colleagues for their continuous support. Together, we can create meaningful changes in dermatology and ensure better healthcare outcomes for future generations.



**Prof Dr
Péter Holló**
**Board representative
of Hungary**
2024–2027

I am full-time professor and chair at the Department of Dermatology, Venereology and

Dermatooncology at Semmelweis University, Budapest, Hungary. In addition to dermatology, I also have a degree in clinical oncology as a second specialty. My main fields of interest are inflammatory diseases, especially prognostic factors and comorbidities of psoriasis, mainly cardiovascular aspects. My other field of scientific research is the examination of the clinical and different molecular prognostic markers of melanoma and other skin tumours.

A core part of my activity is gradual education in dermatology at Semmelweis University and postgraduate training of certified dermatologists in Hungary.

It is a great honour for me to represent Hungarian colleagues in the EADV Board. In my opinion, the dermatology profession faces lot of challenges and I expect this to expand in the future. The interdisciplinary character of the profession is an advantage and a disadvantage at the same time, but we should be able to benefit from it. One of the big challenges is to find the exact place of digital and artificial intelligence-powered solutions.

As current Vice-President of the Hungarian Dermatology Society, I have always been passionate about developing the dermatology profession, establishing and raising our profession's place among other medical disciplines. As a member of the Board of EADV I would like to expand these on an international basis, thus enhancing my influence on the future of positioning and acceptance dermatology. I aim to strengthen collaboration both in the field of scientific research and education, which will improve patient care and our profession.

To help EADV members get to know our Academy's Board Members and better understand their background and experience, as well as their motivation for being part of the EADV Board, in each edition of EADV News, we'll feature the profile of four Board Members (in no particular order).



**Prof Dr
Gudrun Ratzinger**
Board representative
of Austria
2022–2025

I am grateful for the opportunity to be part of the EADV Board as representative for Austria.

EADV has been a constant supporter in my career as dermato-venerologist from early on by offering training, expertise, funding for scientific projects and guidance in leadership, that were all instrumental in my advancement in the field.

In 1995, I started my postgraduate education as a student in one of the experimental laboratories at the Department of Dermatology, Venereology and Allergology at the Medical University Innsbruck, Austria. In 1997, I continued as a resident, focusing especially on dermatohistopathology, oncology and autoimmune diseases. After two years of research at the Memorial Sloan Kettering Cancer Center in New York, US, I returned as clinician, scientist and teacher to my home clinic in Innsbruck. I am currently the clinical head of the department.

All steps of my dermato-venereological path have been accompanied by EADV. Courses, symposia, congresses and the journals are important additions to the offer of the national societies. While the biology and the diseases do not differ between countries, approaches and focus areas do. It is very useful to exchange experiences and know how and learn from each other. Thus, we can constantly evaluate our procedures and improve.

EADV offers the perfect platform for scientific and clinical exchange and progress. Additionally, and not the least important, you connect with interesting and inspiring people from all over the world and make friends.



**Prof Dr Jorge
Ocampo-Candiani**
Board representative of
International EADV
Members
2024–2027

I graduated from the University of Nuevo León, Mexico, in 1981 and completed my dermatology

residency at the University Hospital in Monterrey, Mexico, in 1986. My training continued with a subspecialisation in dermatologic surgery and Mohs surgery at the Hospital Sagrado Corazón, University of Barcelona, Spain. I pursued additional studies in Houston (US), Birmingham (US), Minneapolis (US), Paris (France), and Atlanta (US), culminating in a PhD and master's degree from the University of Valencia, Spain.

Since 1988, I have been a full-time faculty member at the University of Nuevo León, serving for 36 years, including as Chairman of the Department of Dermatology. Throughout my career, I have held leadership positions in national and international organisations, including serving as President of the International Society for Dermatologic Surgery and the Ibero-Latin American College of Dermatology (CILAD). I have also actively contributed to the American Academy of Dermatology (AAD) and the International Society of Dermatology (ISD), where I am currently on the Executive Committee as Executive Vice President.

As a member of EADV, I have had the privilege of lecturing at numerous congresses and collaborating with peers through presentations and research. I was also honoured to be selected as awardee for one of the International EADV Awards in 2022.

Looking ahead to 2027, I am honoured to serve as President of the World Congress of Dermatology in Guadalajara, Mexico. This role represents a unique opportunity to foster closer ties between EADV and the global dermatology community, enhancing the Academy's presence on the international stage. It is a privilege to contribute to EADV as an International Board Member, working together to advance excellence in dermatology and venereology worldwide.

EADV Membership: A commitment to excellence and professional development

As a dermatovenereologist and EADV Secretary General, I am immensely proud to be part of an organisation that represents over 11,000 dermatologists and venereologists across Europe and the wider world. The European Academy of Dermatology and Venereology (EADV) is not simply a professional association; it is a vibrant and dynamic community built on the principle of *"Together for Better."* Whether through pioneering education, advocacy or exclusive opportunities, EADV is here to support you and advance our fields, ensuring a shared vision for the future of dermatology and venereology.

Listening to members: The heart of EADV

My role at EADV is guided by one central principle: listening to you. Our members are the foundation of this organisation and your feedback shapes every initiative we undertake. The results from recent surveys reflect a strong level of engagement and satisfaction, reaffirming EADV's role as a trusted partner in your professional development.

Membership satisfaction and growth

With 85% expressing satisfaction with their EADV membership, we feel encouraged by the feedback from our members. This high level of satisfaction is particularly evident among our junior members, who rate their experience at 4.59 out of 5. Since 2021, membership has grown substantially, especially among female members and specialists in autoimmune diseases and paediatric dermatology - highlighting how we

adapt to the evolving needs of our diverse community.

Priorities and key areas of support

Education remains the cornerstone of what EADV offers, with the highest satisfaction score of 4.58 out of 5. As someone who has spent years both practising and teaching, I deeply understand the importance of fostering high-quality, accessible educational opportunities at all stages of your careers. In particular, our younger members have highlighted:

- High-quality educational programmes.
- Harmonisation of dermatology education across Europe.
- Advocacy to elevate our specialty within the broader healthcare landscape.

Additionally, I am pleased that our scholarships, grants and in-person

events continue to provide an essential contribution, supporting you in growing professionally and expanding your professional networks.

Maximising awareness and accessibility

On average, our members are familiar with 10 to 11 out of 25 of the key benefits available, with the *Journal of the European Academy of Dermatology and Venereology (JEADV)* and Continuing Medical Education (CME) opportunities being the most well-known. Younger professionals tend to favour face-to-face learning experiences, while senior members often prefer digital resources. By understanding these preferences, we are able to refine our offerings and ensure they remain accessible to all.

Turning insights into action

At EADV, we are committed to turning your feedback into concrete actions. Some of our recent initiatives include:

- **Health Care Professional (HCP) scholarships:** We have allocated 150,000 euros to support nearly 500 young dermatologists, venereologists and trainees who attended our annual EADV Congress in Amsterdam, Netherlands, fostering career development and international networking.
- **Exclusive discounts:** In collaboration with Elsevier, we have secured a 30% discount on 20 essential dermatology print and eBooks, ensuring that critical resources are more affordable and accessible.



- **‘Member invites a member’ programme:** Through this initiative, we welcomed over 300 new junior professionals into our community by offering them complimentary membership for 2024.

Strengthening membership policies

To further enhance the value of membership, EADV has introduced key policies that prioritise and reward our members.

Funding opportunities ([Learn more](#))

- Exclusive access to Project Proposal and Review Committee (PPRC) offers for active EADV members.
- Honours and Awards Committee scholarships reserved for EADV members.
- Priority registration for HCP scholarships.
- Reduced registration fee ticket prioritised for EADV members.

Leadership and professional involvement

- Dermatologists and venereologists in EADV working groups, scientific session chairs and co-chairs must be EADV members.
- Priority access for EADV members in Education Committee courses and speaker roles.
- EADV task forces must maintain at least 80% EADV member participation.

These measures expand the value of EADV membership, creating greater opportunities for professional growth and leadership.

Shaping the future, together

As your Secretary General, I am fully committed to ensuring that EADV continues to serve as a cornerstone of support for every member. By listening, adapting and continually improving, EADV will remain at the forefront of advancing dermatology and venereology. Together, we will shape a future that fosters excellence in our field and supports our collective growth.

Thank you for your ongoing commitment to our community. With your continued and enthusiastic support, the future looks brighter and more inspiring than ever. *#Together for Better*



Prof Carmen Salavastru

EADV Secretary General

EADV Leadership

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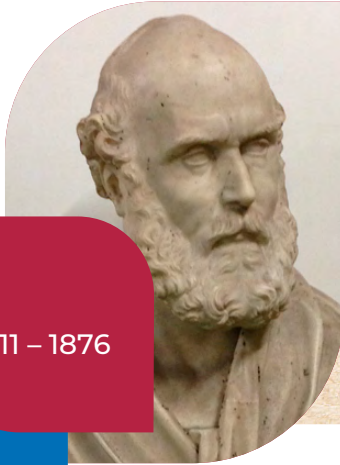
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**ABSTRACT
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1811 – 1876

Campbell Grieg De Morgan

Campbell Grieg De Morgan was born in Clovelly, Devonshire on 22 Nov 1811³, as the third of three sons, to Colonel John de Morgan of the Indian Army and Elisabeth (née Dodson)⁴.

His family tree stretches back to at least 1684³, with John De Morgan, also an officer of the Indian Army. He was educated at the University College London and the Middlesex Hospital, where he became Assistant Surgeon in 1842⁵ and Professor of Anatomy three years later upon the retirement of Mr Edward Tuson^{5,6}. He became Full Surgeon in 1854, after the departure of Mr Tuson.

Mr De Morgan (British surgeons are traditionally called "Mr") became MRCS (Member of the Royal College of Surgeons) on 9 Oct 1835 and FRCS (Fellow of the Royal College of Surgeons) on 11 December 1843, as one of the original 300 Fellows⁶. He later acceded to the Fellowship of the Royal Society based on a paper on the development of bone⁵.

His description of the lesions bearing his name was made in connection with

cancer "I have noticed, and it has been verified by the observation of many others, that concurrently with, or following on, the development of cancer, small outgrowths of warty or vascular or dermoid structure are frequent."⁷ Whether cherry angiomas were indeed what Mr De Morgan had alluded to is a matter for debate, as he appears not to discuss them elsewhere.

He had a keen interest in cancer care and can be described as a forerunner of oncology and cancer immunotherapy. His assertion that cancer began locally and spread to lymph nodes and other organs, widely accepted today, was opposed by Sir James Paget, who insisted on a hereditary, therefore constitutional, origin of cancer^{5,8}. This was not disputed by Mr De Morgan⁸. He described spontaneous remission of cancer, which sometimes was associated with

severe concurrent infections, such as erysipelas, heralding the field of immunotherapy of cancer⁸.

Campbell De Morgan was married to Kate (née Hudson) and they had three children, two sons and a daughter (the latter dying shortly after birth)^{4,9}. His wife died shortly thereafter. He was known for his kindness, uprightness and his humility. He avoided the limelight and did not seek wealth⁹. His characteristic kindness is considered the cause of his death, as he spent a night at the deathbed of his friend John Graham Lough, developing pneumonia and dying on 12 April, 1876.

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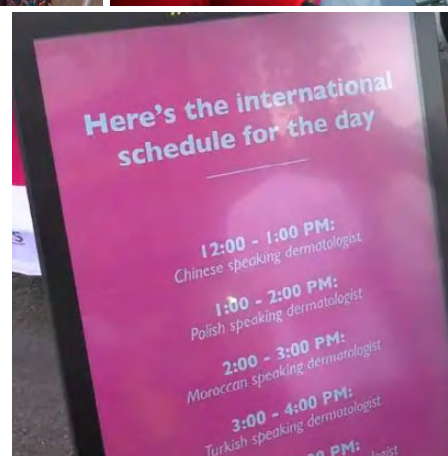
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Skin@theMarket

During the EADV Congress in Amsterdam, Skin@theMarket, a team of international dermatologists, organised a stall at the Dapper Market in the city to invite passersby to share their questions and concerns about skin.

The Skin@theMarket stall was a joint initiative between EADV and Huidfonds, the Dutch national skin association committed to reducing skin diseases and improving life with skin disease. The stall featured enthusiastic dermatologists speaking Dutch, Polish, Moroccan, Chinese, Turkish and Portuguese. The initiative was much appreciated by visitors to the stall and even featured on AT5, a local news channel.

Not only could people ask questions, but the team had a private space nearby where they could conduct quick inspections. The team was surprised by how easily people opened up about their concerns, while having not dared to go to the doctor or a dermatologist. The team also found that many people are misinformed about skin health.



Skin@School

As part of the EADV Congress in Amsterdam, the Netherlands, in September 2024, Dutch dermatologists were raising national awareness about the skin and the impact of chronic skin conditions on children in September and October 2024.

Providing necessary support

To support this, dermatologists, together with experts by experience (a person with a skin condition), provided guest lessons at primary schools across The Netherlands. The Dutch Skin Coalition, the umbrella organisation for people with skin conditions in the Netherlands has developed a teaching package - Skin @ School – that addresses the underestimation of skin complaints, recognising the impact on children's quality of life, particularly those who experience bullying as a result of their skin's appearance.

Developing student knowledge

Parents of affected children face challenges discussing these issues at school. With the Skin @ School teaching package, students develop their knowledge, understanding, skills and attitudes regarding their own skin and that of other students. This enables them to prevent health risks and improve their wellbeing and

resilience. Within the package, students learn about the structure and function of the skin, about similarities and differences between people's skin, about the importance of skin care, about temporary and permanent skin conditions and their consequences and to consciously and critically evaluate online information. The teaching materials (a prototype in English; final version in Dutch) can be downloaded for free, and a physical teaching kit (in Dutch) can be requested from the Dutch Skin Coalition.

EADV guest lessons

Based on the existing Skin @ School materials, four versions of the EADV guest lesson have been developed for different age groups: 4–6, 6–8, 8–10 and 10–12 years. Lessons for the upper primary levels lasted about 60 minutes, while those for the lower levels took 45–50 minutes. It is important to use a variety of teaching methods during the lesson to maintain students' attention and



achieve the lesson objectives. Therefore, questions and answers were used, along with reading a children's book and completing a (drawing) assignment.

In nine out of the 12 provinces in the Netherlands, guest lessons were delivered by dermatologists and patient experts with conditions such as eczema, vitiligo and ichthyosis. There was sufficient interest among dermatologists, schools and patient experts. However, finding a suitable time that worked for both the dermatologist and the school was sometimes challenging. In total, two EADV guest lectures Skin @ School were conducted.

Further reading

Van der Geugten, J. Veldman, K. Skin at School: Educational Materials on Skin and Skin Diseases for Primary Schools (2024). British Dermatological Nursing Group 23;4

Link: https://issuu.com/bdngdn/docs/dn_december_23.4_2024_lr_2

What the dermatologists involved thought:

"The incredibly good and interesting questions from the children. Their questions are still so open and pure. The story shared by the patient expert had a significant impact."

"Don't hesitate, these lessons are extremely valuable. I believe the story shared by the expert by experience will stay with them for a long time."

"What stayed with me is that the students spontaneously shared their spots and stories about their spots and skin conditions."

Face-to-face activities

2025



2025

JANUARY

Dermoscopy in Clinical Practice

Ahmed Sadek, Harald Kittler
17–18 January 2025
Vienna, Austria

FEBRUARY

Cutaneous Lymphoma

Marie Beylot-Barry
3–5 February 2025
Bordeaux, France

Skin Pigmentation in Universal Dermatology

Rūta Gancevičienė, Christos C. Zouboulis
10–11 February 2025
Vilnius, Lithuania

MARCH

Non-Invasive Imaging in Dermatology

Elisa Cinotti, Mariano Suppa
17–19 March 2025
Siena, Italy

APRIL

Therapeutics in Hair Loss and Hair Transplant

Sergio Vañó Galván, David Saceda Corralo,
2–4 April 2025
Madrid, Spain

Confocal Microscopy: Integration in Clinical Practice

Salvador González
3–5 April 2025
Madrid, Spain

Injectables: Toxins and Fillers

Zekayi Kutlubay
12–13 April 2025
Istanbul, Türkiye

MAY

Masterclass - Infectious diseases in dermatology: New challenges and paradigms

Marie-Aleth Richard
24 May 2025
Prague, Czech Republic

JUNE

Understanding and Treating Nail Disorders

Bertrand Richert
5–7 June 2025
Toulouse, France

Dermoscopy Summer Workshop

Marija Buljan, Sanja Poduje
23–27 June 2025
Vis, Croatia

JULY

Basic Surgery

Myrto Trakatelli
3–5 July 2025
Thessaloniki, Greece

Mohs Surgery in Vivo

Pedro Rodríguez
10–12 July 2025
Madrid, Spain

SEPTEMBER

Body Modifications

Christa De Cuyper, Aneta Szczerkowska-Dobosz
3–5 September 2025
Gdansk, Poland

Parasitologic Dermatology

Antoine Bertolotti
3–5 September 2025
Antwerp, Belgium

Peelings from A-Z

Fotini Bageorgou
26–28 September 2025
Santorini, Greece

OCTOBER

Leg ulcers: Hands-on training

Elena Conde Montero, Catherine van Montfrans
15–17 October 2025
Madrid, Spain

Genital HPV from Paediatric to Mature Age

Marco Cusini
28–30 October 2025
Turin, Italy

NOVEMBER

The Art of Injectables

Brunilda Bardhi
6–8 November 2025
Tirana, Albania

Advanced STIs

Henry de Vries
19–21 November 2025
Amsterdam, Netherlands

DECEMBER

Wound Healing

Marco Romanelli
2–4 December 2025
Pisa, Italy

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





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DERMATOLOGY &
VENEREOLOGY

Calendar of Events

2025

36th Nordic Congress of Dermatology & Venereology (NCDV 2025)

6–9 May 2025 | Helsinki, Finland

[Continue reading >](#)

EADV Symposium

22–24 May 2025 | Prague, Czech Republic

[Continue reading >](#)

24th ESPD Congress

29–31 May 2025 | Brussels, Belgium

[Continue reading >](#)

105th Annual Meeting of the British Association of Dermatologists

1–5 July 2025 | Glasgow, Scotland

[Continue reading >](#)

3rd World Congress on Public Health and Epidemiology

04–05 August 2025 | Tokyo, Japan

[Continue reading >](#)

34th EADV Congress

17–20 September 2025 | Paris, France

[Continue reading >](#)

UEMS European Board of Dermatovenereology Diploma Examination

26 September 2025 | Frankfurt, Germany

[Continue reading >](#)

13th International Forum for the Study of Itch (IFSI)

World Congress on Itch

12–14 October 2025 | Heidelberg, Germany

[Continue reading >](#)

15th Georg RAJKA International Symposium on Atopic Dermatitis

24–26 October 2025 | Melbourne, Australia

[Continue reading >](#)

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