EADV NEWS

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Two years of shared progress

As my Presidency has drawn to a close, I look back on these two years with gratitude and pride in what we have achieved together. When I began my mandate, I expressed my commitment to supporting our scientific community, strengthening education and advocacy and addressing inequalities in patient care. These priorities have guided our work throughout, with the dedication of our members and staff making progress possible.

A record-breaking event

Our recent EADV Congress in Vienna, Austria, provided a wonderful conclusion to this journey. Welcoming 20,364 visitors from 139 countries, it brought together more than 500 speakers across 147 scientific sessions, including 10 plenary lectures. With 4,800 accepted abstracts from 6,200 submissions, alongside 16 workshops and more than 30 subspecialty sessions, the programme demonstrated the breadth and vitality of our specialty. My heartfelt thanks go to everyone who contributed to this gathering.

Following our successful Paris Congress in 2025, Vienna reaffirmed the Academy's ability to connect colleagues through science and shared learning. Our community now comprises more than 15,000 members from 136 countries, reflecting the trust placed in EADV and our increasingly international reach.

Committed to progress

During this period, we also renewed our vision and mission, reaffirming our commitment to advancing care, education and research while empowering a diverse professional community. This shared direction provides a foundation for the Academy's continued development.



Strengthening the voice of dermatology and venereology in public policy has been a particular priority. Through our Dermatovenereology and Patient Advocacy Task Force, supported by our public affairs partner, we deepened engagement with European institutions and patient organisations. Meetings with Members of the European Parliament opened opportunities to address skin cancer prevention, occupational skin diseases and inflammatory conditions.

Advocating for our specialty

Our European Parliament event, "Beyond the Glow", brought policymakers, patient representatives and leading cancer and dermatology organisations together to address the harmful effects of sunbeds. Joint letters to the European Commission reinforced our call for stronger regulation, sustaining attention on an avoidable public health risk.

> "I expressed my commitment to supporting our scientific community, strengthening education and advocacy and addressing inequalities in patient care"

Our advocacy also highlighted the experiences of people living with atopic eczema and epidermolysis bullosa. Supporting patient-led initiatives and discussions on implementing the World Health Assembly Resolution on skin diseases reinforced a conviction central to our work: Scientific expertise and patients' lived experiences must both inform policy. The Resolution represents an important international milestone and EADV has supported efforts to translate that recognition into better prevention and care.

Partnerships matter

Collaboration has also advanced our scientific and educational ambitions. Our agreement with International Union Against Sexually Transmitted Infection (IUSTI) Europe strengthened cooperation in education, research and awareness of sexually transmitted infections, affirming venereology's essential place within our Academy. The Academy is also in discussions with the European Academy of Allergy and Clinical Immunology (EAACI) with the intent of organising a webinar series.

International exchanges with colleagues in the United States, Canada, Japan, China and India, alongside other partner organisations, strengthened relationships and created opportunities for shared learning. These connections matter because our challenges, and the knowledge needed to address them, extend beyond national borders.

Investing in the future

Investing in our members has been equally important. The reinstated Leadership Development Programme welcomed 30 successful candidates, supporting the skills needed to lead in a changing professional environment. More recently, the survey of younger members and establishment of the Young Dermatologists Working Group have created opportunities to listen and involve the next generation in shaping EADV. I warmly acknowledge Marie-Aleth Richard's early leadership of these initiatives and wish her every success as she takes the Academy forward. I also look forward to remaining involved and continuing to support selected

EADV Vision:

Drives the future of dermatology and venereology by leading progress, empowering a diverse professional community, improving patient care and setting new standards of excellence across Europe and beyond.

EADV Mission:

Advances care, education and research in dermatology and venereology by connecting professionals and fostering innovation worldwide, through events and educational opportunities.





initiatives and priority areas where I can contribute to their further development.

My sincere thanks go to the Executive Committee, Board, committees, task forces, speakers, partners and dedicated EADV staff for their invaluable contributions and support. I would also like to express my gratitude to Mrs Emma Negrato, Executive Assistant to the President, with whom it has been a true pleasure to work throughout my mandate. Above all, I thank you, our members, for your trust, commitment and continued support.

It has been an honour to serve as your President. Improving access to high-quality care across countries remains unfinished work, but I leave confident in our community's determination to pursue it. I will carry with me the friendships, shared purpose and many rewarding moments of these two years.



Branka Marinović

EADV Immediate Past-President (2024–2026)

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Cover page, from left to right:
Branka Marinović, Immediate Past-President,
Monika Arenbergerovà, EADV News Editor,
Marie-Aleth Richard, President,
Carmen Salavastru, President-Elect
Jo Lambert, Board representative of Belgium and JEADV Associate Editor

A personal message on the transition of EADV News editorial leadership

After a meaningful and rewarding-period of serving as *EADV News* Editor, the time has come to pass the editorial leadership to an excellent colleague and friend, Prof MUDr Monika Arenbergerová.

The responsibility of leading our journal for 10 years has been a privilege that I have genuinely valued. Following the superb previous editors Prof Martin Black and Prof Gregor B.E. Jemec, it has been much more than simply holding an editorial position. It has meant being part of a shared intellectual and professional endeavour, contributing to the exchange of ideas, supporting the work of authors and contributors and helping create a space where information, opinions and different perspectives of our Academy could be presented and discussed.

Looking back, I am particularly grateful for the people with whom I have had the opportunity to work. My sincere thanks go to the editorial team, authors, contributors, colleagues and all those who have supported the *EADV News* and its continuous transformation to a modern representative of EADV life throughout this period. Their professionalism, cooperation, trust and willingness to share their knowledge and experience have made this journey both enriching and memorable. An editor may formally carry the responsibility for a publication, but its real value and success are always the result of collective effort.

I am also grateful to our steadily increasing number of readers, whose interest and engagement give meaning to the work of any journal. Your attention, feedback and continued interest have been an important source of motivation and a reminder of the responsibility that comes with publishing information and ideas.

Of course, every period of leadership eventually reaches its natural conclusion. I believe that institutions and publications benefit from renewal, new perspectives and the energy that comes with new leadership. Passing on this responsibility is therefore not simply the end of a personal chapter, but also an opportunity for the journal to continue developing under fresh editorial guidance.

I am pleased that Prof Arenbergerová takes over the position. I sincerely wish her confidence, inspiration, patience and success in fulfilling this important responsibility. I hope that she will find the same professional satisfaction and meaningful cooperation that I have experienced. I also trust that the editorial team, contributors and readers will offer her support and encouragement during this transition.

Thank you to everyone who has been part of this journey. It has been a privilege, an honour and a genuinely valuable experience.

With sincere appreciation and best wishes for the future



Prof. Dr. med. Prof. honoraire Dr h.c. Christos C. Zouboulis

Outgoing EADV News Editor



A word from our new EADV News Editor

It is with great honour, and with genuine enthusiasm that I accept the role of the new Editor of EADV News. I aspire to continue the outstanding work of Prof. Christos C. Zouboulis.

First and foremost, I would like to express my deepest gratitude to Prof. Zouboulis for his extraordinary dedication, vision, and leadership over the past ten years. The opportunity to take over a publication built on such a strong foundations is both a great privilege, and a responsibility I am ready to embrace with utmost accountability.

While I am committed to preserving the prestigious tradition and high standards of our journal, I would also want to bring in fresh energy, new columns and compelling perspectives to its pages. But above all, I plead that You remember one thing - this journal belongs to You. It is created for us, EADV members, and for every dermatologist who wants to be part of a greater, thriving community.

I vow to set my objective to not just be keeping you informed about the latest news and scientific breakthroughs in the EADV community, but also to bring us closer together as colleagues in the field. I want EADV News to be a welcoming space where we can share our clinical expertise, celebrate our achievements, and genuinely connect across borders.

Per Christos's ever so wise words - 'a journal only thrives through collective effort'. So please, reach out, share your stories, and let us know what matters most to you.

Thank you so much for your trust and warm welcome - I cannot wait to connect with you all through the content of EADV News!



Prof MUDr Monika Arenbergerová, Ph.D.

EADV News Editor





Martin Black



Gregor Jemec



Christos Zouboulis



Monika Arenbergerovà





France returns as winners of the third EADV Games

The third edition of the EADV Games took place at the 2026 EADV Congress in Vienna, Austria, and again provided an exciting educational experience for all.

The raison d'être of the EADV Games is to foster learning and camaraderie among dermatology professionals through interactive, gamified content. In each outing, participants engage in quizzes, challenges and team competitions focused on dermatology knowledge, clinical case studies and recent advancements.

Open to residents, this year's event saw participants from 18 countries competing in a thrilling quiz covering a range of dermatology topics. In the final, it was France – the winner of the very first edition in 2024 – vs. Poland.

And the French won for their second time.



Participating countries

Austria Bulgaria Denmark Estonia France Germany Hungary Ireland Latvia

Moments from the third edition of the EADV Games, bringing together dermatology residents from across Europe for an exciting celebration of teamwork, knowledge and friendly competition.









Poland Romania Serbia Slovakia Spain Sweden Türkiye Ukraine United Kingdom

Celebrating excellence: EADV 2026 awards

Each year, EADV recognises exceptional individuals whose achievements have contributed to the advancement of dermatology and venereology.

The 2026 EADV Awards once again celebrated the dedication, innovation and international collaboration that define our community. This year's honourees represent excellence in science, clinical care, service and global leadership, reaffirming EADV's commitment to advancing dermatology and venereology and improving outcomes for patients worldwide.

EADV Scientific Achievement Award

Prof Dr Christine Bodemer (France)

The award was presented by Professor Martin Röcken

The EADV Scientific Achievement Award celebrates individuals whose research and innovation have significantly advanced the scientific understanding and management of skin and venereal diseases.

Congratulations to Professor Dr Christine Bodemer, recipient of the 2026 EADV Scientific Achievement Award, recognising her outstanding research and innovation advancing our understanding and management of skin and venereal diseases.



EADV Clinical Care Award

Dr Antonio G. Massa (Portugal)

The award was presented by Professor Margarida Gonçalo

The EADV Clinical Care Award honours those who demonstrate exceptional commitment to patient care and clinical excellence.

Congratulations to Dr Antonio G. Massa, recipient of the 2026 EADV Clinical Care Award, honouring his exceptional commitment to patient care and clinical excellence in dermatology and venereology.



EADV Distinguished Service Award

Assoc Prof Mette Søndergaard Deleuran (Denmark)

The award was presented by Professor Menno de Rie

The EADV Distinguished Service Award acknowledges individuals who have made lasting contributions through leadership, advocacy, education and service to the dermatology and venereology community.

Congratulations to Associate Professor Mette Søndergaard Deleuran, recipient of the 2026 EADV Distinguished Service Award, recognising her lasting contributions to our specialty through leadership, advocacy, education and service.



EADV International Awards

EADV International Awards celebrate individuals outside Europe whose work has had a profound global impact on dermatology and venereology. This year, three outstanding international leaders are recognised for their exceptional scientific, clinical and educational contributions worldwide.



Prof Dr Seemal R. Desai (USA)

The award was presented by Professor Marie-Aleth Richard (FR)

Congratulations to Professor Dr Seemal R. Desai, recipient of a 2026 EADV International Award, recognising his outstanding scientific, clinical and educational contributions to dermatology worldwide.



Dr Michele Ramien (Canada)

The award was presented by Professor Branka Marinović

Congratulations to Dr Congratulations to Dr Michele Ramien, recipient of a 2026 EADV International Award, celebrating her exceptional contributions to dermatology and venereology and their impact on the global dermatology community.





The Vienna winners were honoured at the presidential dinner held on 2 October at the Natural History Museum in Vienna





From COVID-19 to the infodemic:

Implications for the future

Of the five major global crises currently prioritised by the United Nations, pandemics and the growing threat of infodemics pose near-term risks that require urgent mitigation. As seen with HIV/AIDS and COVID-19, both scientific progress and persistent gaps exist in the global response to pandemics. To respond to these pandemics, science has provided the evidence to guide public health actions.

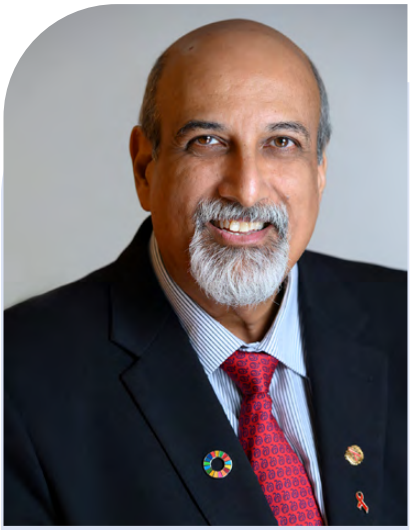


Building on the lessons learned from AIDS

With AIDS, a 40-year research journey is captured by its key milestones where clinical research provided critical evidence. Whether the focus is on treatment or prevention, carefully accumulated scientific evidence, largely through clinical trials, has guided the global AIDS response. Building on the lessons learned from AIDS, a research response to COVID-19 generated critical evidence that identified the first SARS-CoV-2 variant and subsequently Omicron in South Africa. The research response to COVID-19 in that country is analysed and its influence on the global pandemic response outlined.

Dis-information is driving societal polarisation

While mis- and dis-information existed long before COVID-19, the pandemic provided a new impetus for the current infodemic, particularly through unregulated social media. A dangerous trend has emerged where dis-information is driving societal polarisation and erosion of trust in science. Disinformation has become central to camouflage the accumulation of wealth and power by a few individuals, while truth-sayers have become targets. Intellectuals, scientists and doctors are key to upholding truth in society as truth-sayers committed to creating a safer and healthier world.



Speaker:

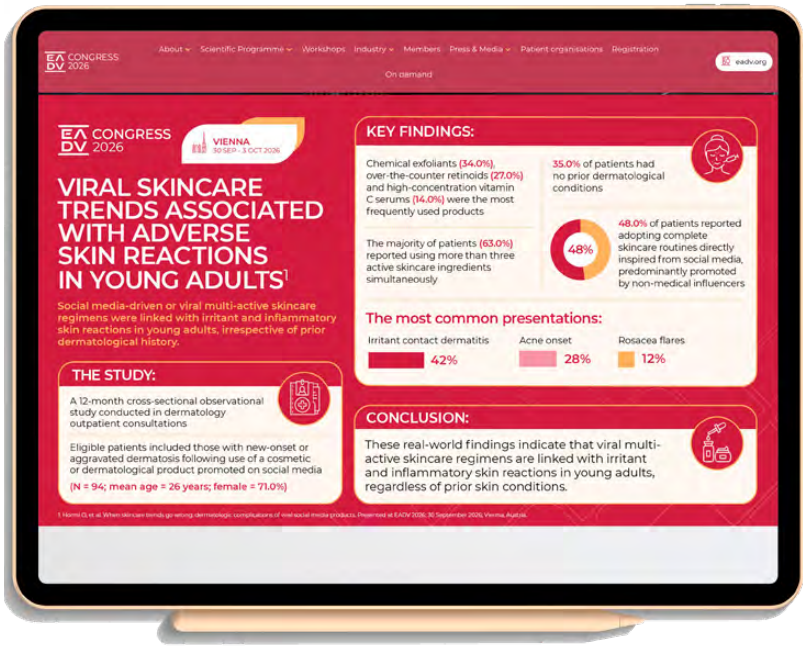
Salim S. Abdool Karim, FRS, Director CAPRISA and Professor of Global Health, Columbia University, US

*You can access this presentation and the entire scientific programme via the **EADV Congress Platform***

Snapshots of recent research

For the first time, this year's EADV Congress featured a number of infographics that provide a snapshot of interesting insights from recent research on various topics in an easy to understand format. Two are featured below.

You can access the others via **eadv.org/congress**.





What does an EADV scholarship mean? A conversation with Dr Luca Potestio

EADV News regularly talks with scholarship winners about what made them apply for an EADV scholarship, what winning means to them and what advice they would give to others. Here, we hear from Dr Luca Potestio, who is also a junior co-opted member of the EADV Honours and Awards Committee.

What inspired you to apply for an EADV scholarship?

My first motivation to apply for an EADV scholarship was the desire to become more actively involved in the international dermatology community. As a young dermatologist and researcher, I have always considered scientific exchange an essential part of professional growth. EADV represents one of the most important platforms in Europe to learn from experts, present research and build meaningful collaborations.

Applying for opportunities such as the John Stratigos Memorial Scholarship, the Best Researcher Award and other EADV grants was a way to challenge myself, to share my work beyond my national context and to become part of a wider network of colleagues with similar interests and aspirations.

What was the most challenging part of the application process?

Probably learning how to present my academic and clinical journey in a clear and convincing way. Young professionals often have many activities, including clinical work, research projects, publications, congress presentations and gaining training experience, but it is not always easy to turn them into a strong application.

The process required time, attention to detail and self-reflection. It also helped me understand the importance of building a coherent professional profile, where clinical practice, research and education are not separate areas, but complementary aspects of the same journey.

How has receiving an EADV scholarship influenced your career and professional development?

Receiving EADV scholarships and awards has allowed me to attend international meetings, present my research to a wider audience and interact with colleagues and experts from different countries. Beyond the scientific value, the experience has given me confidence by making me feel that my work has been recognised within a highly competitive and international environment. This was particularly meaningful at an early stage of my career, when encouragement and visibility can make a real difference.

EADV also helped me better understand the value of networking. Many professional opportunities start from congresses, discussions, shared projects and informal exchanges. In this sense, the scholarships not only provided financial support, but also an entry point into a broader academic and professional community.

What does receiving these scholarships and awards mean to you personally?

On a personal level, receiving these recognitions was a great honour and a strong motivation to continue dedicating myself to my work. Dermatology is a field that combines clinical care, scientific innovation and close contact with patients, and I have always tried to develop my career by keeping these dimensions together.

The EADV scholarships reminded me that perseverance, curiosity and commitment can open important doors. They also made me feel part of a European community that supports young dermatologists and researchers, not only by recognising their achievements, but also by encouraging their future development.

What motivated you to join the Honours and Awards Committee?

Having benefited from EADV opportunities, joining the Honours and Awards Committee felt like a natural step. I wanted to contribute from the other side, helping promote initiatives that can support young members in their professional and academic growth.

I know how important these opportunities can be for early-career dermatologists. A scholarship or award can encourage a young colleague to attend an international congress for the first time, present their research, meet senior experts or simply believe more strongly in their own potential. Being part of the committee is therefore both a responsibility and a privilege.



Why do you believe applying for an EADV scholarship is important for young professionals?

The application process itself is valuable. It encourages young professionals to reflect on their achievements, define their goals and understand how they wish to contribute to dermatology and venereology. My advice to young colleagues is simple: Apply, even if you are not sure that your profile is strong enough. Do not be discouraged by competition or by previous unsuccessful applications. Each application is an opportunity to improve, to better organise your work and to become more aware of your professional path.

EADV scholarships and awards can represent a turning point. They can offer visibility, international exposure and motivation. Most importantly, they can help young dermatologists feel that they are part of a community that values their efforts and invests in their future.

What are your aspirations as a member of the Honours and Awards Committee?

I would like to contribute to making EADV opportunities increasingly visible, accessible and encouraging for young members. I believe it is important that talented and motivated colleagues from different countries and backgrounds feel invited to apply.

My aspiration is to help promote a culture in which scholarships and awards are perceived not as distant or unattainable recognitions, but as concrete opportunities for growth. I would also like to support initiatives that strengthen the involvement of young dermatologists in the Academy, fostering collaboration, mentorship and international exchange.

For me, EADV has been a place of opportunity, recognition and growth. I hope that my experience can encourage other young colleagues to take the same step, apply for future opportunities and become more actively involved in the life of the Academy.



Scholarship ceremony of the EADV Congress 2024 in Amsterdam, where Potestio was one of the winners of the Scholarships offered by EADV

Sharing knowledge, raising awareness



Since its foundation, the EADV HPV Infection Task Force has continuously and progressively advanced collaboration on HPV-related topics, focusing mostly on genital HPV-infections. Our mission is "sharing knowledge, raising awareness" which we achieve through, among other activities, dedicated educational initiatives, such as EADV courses (Athens 2023, Turin 2025), by taking part in the official EADV Scientific Programme and by developing sessions for major scientific meetings, such as International Union against Sexually Transmitted Infections (IUSTI) Europe.

We believe that offering advanced HPV courses to EADV enthusiastic young members enables interested colleagues to become more familiar with diagnosis, treatment and, most importantly, prevention of HPV-associated diseases. Our ambition is to do our best to empower dermatovenereologists with advanced expertise in the field of the HPV-associated diseases. That is how we also learn.

Gaining new experiences

Our three-day course, already held in Athens, Greece, and Turin, Italy, covers a wealth of key topics. The session has received high ratings both scientifically and socially. During the programme, each participant can present a clinical case. In the last course (Turin), participants could also take part in an auscultation in the clinic. This practical experience was particularly appreciated as it also gave them the chance to see how the work in the clinic differed from their work at home, enabling them to bring new ideas to their hospital. Looking ahead, the task force will build on this momentum with another upcoming HPV Course - "HPV in Dermatology: Lifespan Perspectives and Cancer Prevention" - scheduled for 13 – 15 September 2027 in Vienna, Austria (Chairs: Claudia Heller-Vitouch and Mihael Skerlev).

The task force cooperates closely with other organisations such as IUSTI. Some task force members are already working with the updated IUSTI HPV treatment guidelines, which are usually later published in the *JEADV*.

Making a meaningful contribution

We firmly believe that dermatovenereologists must play a pivotal role in multidisciplinary HPV vaccination and prevention strategies. HPV vaccination has become a cornerstone in cancer prevention, an area in which EADV plays a significant role, even at the level of the European Parliament. Our task force is proud to contribute meaningfully to this effort and has been invited to various meetings. To enhance awareness and outreach, we are exploring new avenues for promoting the work of our task force, including leveraging social media.

Shaping the future

We are truly convinced that the members of our HPV Infection Task Force, in all stages of their careers (from senior experts to junior members) and from different geographical regions will remain actively engaged in highlighting the role of dermatovenereology – our specialty - in shaping the future of HPV prevention.



Mihael Skerlev,
Chair, EADV HPV Task Force



Arne Vikström,
Co-Chair, EADV HPV Task Force



EADV SYMPOSIUM 2027



DRESDEN
20 - 22 MAY

EUROPEAN ACADEMY OF
DERMATOLOGY & VENEREOLOGY

EADV CONGRESS 2027

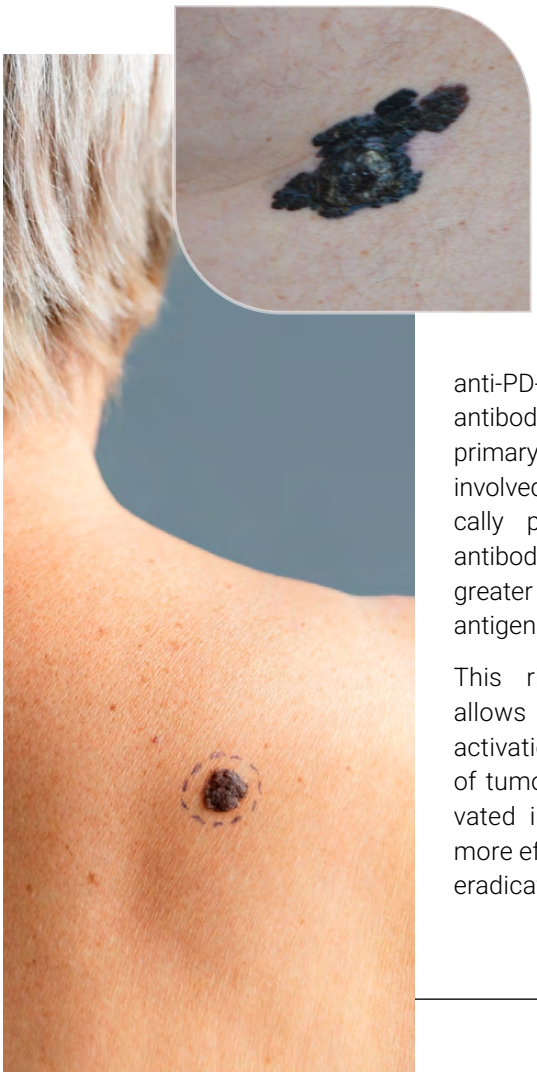


AMSTERDAM
22 - 25 SEPTEMBER

TOGETHER FOR BETTER

Why we are moving from Adjuvant to Neoadjuvant Therapy in melanoma management

The landscape of therapy for respectable, locally advanced melanoma is undergoing a significant paradigm shift. For the past decade, the standard of care for macroscopic Stage III melanoma in majority of cases consisted of upfront surgical resection, followed by twelve months of adjuvant systemic treatment with immunotherapy (anti-PD1 agents) or BRAF/MEK inhibitors. However, recent clinical breakthroughs have challenged this traditional "surgery-first" approach. Present-day, dermatologists and dermato-oncologists are increasingly more open to recognising that initiating immune checkpoint inhibition before resorting to surgical procedure, leads to notably more favourable patient outcomes.



The biological rationale: A stronger immune response

The fundamental advantage of neoadjuvant therapy over an adjuvant-only regimen is rooted in basic tumour immunology. When anti-PD-1 or anti-PD1+anti-CTLA-4 antibodies are administered while the primary bulk of the tumour, and its involved lymph nodes, are still physically present in the body, said antibodies have a considerably greater pool of tumour-associated antigens to interact with.

This rich antigenic environment allows for the broader expansion, activation and clonal diversification of tumour-specific T cells. The activated immune cells then circulate more efficiently, and systemically, to eradicate distant micro-metastases, long before the surgical team commits to performing a lymphadenectomy. In contrast, adjuvant therapy is introduced post-operation into a micro-environment where the main bulk of tumour antigens have been removed, enabling fewer targets for T-cell priming, which subsequently leads to a weaker systemic immune response.

Clinical evidence: Reshaping the standard of care

This biological hypothesis has been robustly validated by compelling, landmark clinical trials. The pioneering SWOG S1801 phase II trial demonstrated that simply shifting the timing of pembrolizumab administration — three doses prior to surgery and fourteen doses after, rather than all seventeen doses post-operatively — resulted in a remarkable 23% improvement in event-free survival (EFS) at the two-year mark.

More recently, the practice-changing NADINA phase III trial has firmly established neoadjuvant combination immunotherapy as the new supported 'gold standard'. The NADINA trial evaluated a brief neoadjuvant regimen consisting of just two cycles of ipilimumab plus nivolumab. Patients who achieved a major pathological response (MPR) or complete pathological response (pCR) demonstrated outstanding, sustained EFS. Subsequent adjuvant treatment was initiated according to response-adapted approach. Above all, this high rate of complete pathological response allowed for a safe

minimisation of post-operative adjuvant therapy, sparing a significant number of patients from unnecessary, long-term systemic toxicities.

Personalised medication and surgical de-escalation

Beyond superior survival statistics, the neoadjuvant approach also provides clinicians with an invaluable in vivo test of tumour biology. Pathological response serves as a highly accurate, early, surrogate marker for long-term clinical outcomes, such as recurrence-free survival or distant metastasis-free survival.

If the resected tissue reveals a complete pathological response, omission of further adjuvant therapy can be confidently considered. Conversely, if the tumour proves to be resistant to the neoadjuvant regimen, the clinician receives immediate feedback that the current treatment is ineffective. This enables a rapid, personalised pivot towards alternative systemic therapies or clinical trials, rather than indiscriminately continuing an ineffective adjuvant drug for a full year.

What does this development mean for dermato-oncologists?

Transition from adjuvant to neoadjuvant therapy represents one of the most exciting leaps forward in modern dermato-oncology. By utilising the patient's own tumour mass to train the immune system before surgical resection, superior systemic protection against disease recurrence is achieved. As we continue to integrate these findings into European standards of practice, the role of the dermatologist, and our routine work, expands. The core principles lie in early detection, prompt staging and immediate multidisciplinary collaboration to ensure that our high-risk patients do not miss out on this critical, pre-surgical window of treatment opportunity.

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Red tattoo pigment allergies remain a challenge even after REACH



The composition of tattoo and Permanent Make-Up (PMU) inks, and the associated safety concerns for consumers, have been a subject of concern for several decades. In Europe, the regulation of tattoo and PMU ink ingredients has continuously evolved since 2003, driven by the evidence that many inks did not meet the safety requirements established by the European Commission and the Council of Europe. In response, the Council of Europe adopted the first non-binding resolution, ResAP(2003)2, which was subsequently updated by ResAP(2008)1[1].

Protecting citizens

To protect European citizens, hazardous chemicals found in tattoo inks and permanent make-up became restricted in the EU under the Registration, Evaluation, Authorisation, and Restriction of Chemical substances (REACH)[2] Regulation that came to effect in January 2022.

In the Netherlands, there is strict supervision of tattoo parlors with specific attention to hygiene and the products used. A project conducted by the Netherlands Food and Product safety Authority (NVWA) in 2024 shows that many tattoo dyes still do not comply with the requirements of the REACH restriction, although there is evidence of improved compliance[3].

Clinical complications?

A recent case series from the Dutch Tattoo Clinic shows that allergic reactions to red tattoo pigments are still frequent, even after the EU REACH regulation aimed to make tattooing safer. Between 2022 and 2024, 15 patients developed allergic reactions to red inks that were applied after REACH took effect, in some cases with inks labeled "REACH-compliant" (Fig 1). These findings underline gaps in current regulation and highlight the need for stronger oversight, better ink testing and continued collaboration between

Fig 1. Red tattoo allergy



clinicians, regulators and industry to protect tattooed individuals across Europe[4].

An ongoing challenge

The EADV Task Force on Tattoo and Body Art in collaboration with the European Society on Tattoo and pigment Research (ESTP) is continuing efforts to collect evidence of shortcomings, identify the culprit and inform all interested parties.



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Alrijne ziekenhuis, Leiden,
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2. Commission Regulation (EU) 2020/2081 of 14 December 2020 amending Annex XVII to Regulation (EC) No. 1907/2006 concerning the Registration, Evaluation, Authorisation and Restriction of Chemicals (REACH) as regards substances in tattoo inks or permanent make-up

3. https://english.nvwa.nl/topics/product-safety/tattoo/supervision-of-tattoo-inks-and-dyes

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Talking Point

Talking Points is an *EADV News* series that explores key dermatology and venereology issues across Europe. In each issue, we spotlight a country-specific topic, shaped by insights gathered through dialogue with national dermatology associations and experts engaged with regulatory and safety bodies. Offering concise yet meaningful perspectives, this series aims to connect the European dermatology community through the issues shaping practice today and invites discussion amongst dermatologists on key topics aiming to shape the future of dermatology as a collective.

In this edition, we focus on sunscreen and its potential link to cancer.

When sunscreen science goes viral:

Separating evidence from misinformation

Can sunscreen increase the risk of skin cancer? Does regular sun exposure protect against melanoma? These provocative questions recently ignited a controversy in Italy, after a physician's viral social media video claimed that sunscreen use increases skin cancer risk, while greater sun exposure may protect against melanoma. The statements attracted widespread attention, prompting strong reactions from dermatologists and public health authorities.



The controversy illustrates a growing challenge: How easily scientific findings can be selectively interpreted, stripped of context and transformed into potentially dangerous health advice.

The sunscreen paradox: Association is not causation

Some observational studies have eported higher melanoma rates among sunscreen users, a phenomenon often described as the *sunscreen paradox*. However, this association does not establish causation. People at greater risk of melanoma, including those with fair skin, previous sunburns or a family history, are more likely to use sunscreen. Furthermore, sunscreen users may spend longer in the sun, sometimes applying insufficient quantities or failing to reapply protection. These behavioural and methodological factors can substantially influence observational findings. Crucially, experimental and epidemiological evidence supports UV radiation as a major cause of skin cancer, while randomised evidence supports the preventive benefits of regular sunscreen use. Presenting an observational association as proof that sunscreen causes melanoma is therefore scientifically unjustified.

Legitimate questions deserve legitimate answers

Nevertheless, dismissing every concern about sunscreens as misinformation would be equally counterproductive. Questions regarding systemic absorption of certain UV filters, their potential endocrine effects, environmental consequences and long-term safety deserve continued investigation and transparent regulatory assessment.

Indeed, some sunscreen ingredients can be detected in the bloodstream following application. But **detecting a substance in the bloodstream is not the same as**



demonstrating toxicity. Similarly, identifying potential biological effects under experimental conditions does not automatically establish clinically relevant harm in humans.

Although repeated sun exposure can induce tanning and some degree of photoadaptation, these responses do not eliminate UV-induced DNA damage or confer immunity against skin cancer. Likewise, adequate vitamin D levels are important, but deliberately increasing unprotected UV exposure is neither necessary nor advisable.

When medical authority amplifies misinformation

Perhaps the most troubling aspect of this controversy is not that misleading claims circulate online, but that they may originate from healthcare professionals. Scientific credentials confer credibility, particularly among audiences unable to critically evaluate complex epidemiological evidence. A confident statement in a short video can reach millions, while explaining confounding, causality and scientific uncertainty requires considerably more effort.

For dermatologists and scientific societies, the response cannot simply be to dismiss such messages. We must engage with the questions behind them, acknowledge genuine uncertainties and communicate evidence in language that is both accessible and compelling.

Scientific debate is essential, but misinformation is not scientific debate. The distinction lies in whether uncertainty is explored responsibly or exploited to promote conclusions unsupported by evidence.

In an era when social media increasingly shapes health behaviours, defending photoprotection requires more than good science. It requires better scientific communication. **When sunscreen misinformation goes viral, is correcting false claims enough or must we, as dermatologists, rethink how we communicate science in the first place?**



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George Crichton Wells



1914–1999

Eosinophilic cellulitis (Well's syndrome) is characterised by the sudden onset of single or multiple pruritic erythematous plaques most often located on the extremities that resemble infectious cellulitis but fail to respond to systemic antibiotics. Some lesions can become bullous while others resemble erysipelas. The presence of fever or malaise may indicate a more severe or progressive course. The lesions tend to gradually resolve over a few weeks, leaving brown discoloration but no scarring. There may be peripheral eosinophilia, but the diagnostic histopathological finding is a diffuse dermal infiltrate of eosinophils with the formation of characteristic "flame figures". Fortunately, eosinophilic cellulitis responds well to tapering courses of systemic corticosteroids, but recurrences are fairly common.

It is now over 50 years ago that G. C. Wells outlined the principal features of eosinophilic cellulitis (Wells syndrome). Initially, he described the disease as "recurrent granulomatous dermatitis with eosinophilia"[1] and documented four cases. But, by 1979, had collected eight further cases and proposed the simpler terminology of "eosinophilic cellulitis"[2]. He was joined in this endeavour by Neil Smith (1946-1996) who was a talented dermatopathologist, but sadly died relatively early from cardiac disease.

Wells and Smith went to great lengths to exclude fungal infections, arthropod bites, early pemphigoid, drug eruptions and other unusual possible factors like Toxocara. That same year (1979), Spigel and Winkelmann proposed the eponym Wells syndrome[3]. Since then, over 100 cases have been reported, ranging from newborns to the elderly. In general, associated systemic features are rarely seen. All major

St Thomas Hospital, London



dermatological textbooks accept that eosinophilic cellulitis (Well's syndrome) is a distinct entity.

George Wells was born on 13 July 1914. His father was Sir Richard Wells, the MP for Bedford, UK. George was educated at Bedford School where he excelled at sports, particularly rowing. He went to Pembroke College, Cambridge, where his rowing crew won the Grand College Challenge Cup at Henley in 1935. From Cambridge, he completed his training at St Thomas's Hospital in 1939 before joining the Royal Army Medical Corps (RAMC) and volunteering for the Para troop regiment and serving in Sicily, Greece and France. After the war, he returned to St Thomas's but was advised to spend time working with the famous Hungarian Émigré Stephen Rothman (1894-1963) who had relocated to Chicago, US. There, he developed an interest in the new subject of histochemistry and contributed a chapter on histochemistry to the famous Rothman book on "*Physiology and Biochemistry of the Skin*", published in 1954. After spending two years in Chicago, George Wells returned to St Thomas's in 1956 as a Consultant in Dermatology and in 1959 set up a laboratory of histochemistry at the St John's Institute of Dermatology, also in London. There, he worked closely with Henry Haber (1900-1962) and Edward Wilson Jones (1926-2021) and together they developed a Histopathology Department that attained global renown.

George married Margaret ("Maggie") Bruce in 1951 who was an artist and celebrated wood block engraver. They enjoyed skiing and hiking in the Swiss Alps where they bought a chalet. Through their unstinting generosity many of his trainees were invited to stay there.

George was very musical and loved attending opera and playing the Spanish guitar. George and Maggie retired to Suffolk in 1979. Maggie died in December 1998 and George died on 16 January 1999 at the age of 84.

Personal experience

I consider myself as being very fortunate to have had George Wells and Edward Wilson Jones as mentors when I trained with them from 1969-1974. George Wells' contacts with many influential American dermatologists especially Richard Stoughton (1923-1992) and Richard Winkelmann (1924-2012) were often invaluable to younger colleagues, including myself. George Wells had a modest, quiet manner, which belied a man of real intellect and kindness.

I was very fortunate to have worked alongside George Wells as a Consultant Dermatologist at St Thomas's from 1974-1979. He was a wonderfully kind and modest colleague who certainly helped me in my formative years as a dermatopathologist.

I believe it is only fitting that his last published work on eosinophilic cellulitis should be known as Wells syndrome.

References

1. Wells G.C. (1971) Recurrent granulomatous dermatosis with eosinophilia. Transactions of the St John's Hospital Dermatologic Society,57,46.

2. Wells G.C. and Smith N.P. (1979) Eosinophilic Cellulitis. British Journal of Dermatology 100,101

3. Spigel G.T. and Winkelmann R.K. (1979) Wells Syndrome. Recurrent granulomatous dermatitis with eosinophilia. Arch. Dermatol 115,91



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Meet the EADV Board



Dr Vanda Bondare-Ansberga

Board representative of Latvia

2025–2028

It is a great honour for me to represent Latvia on the EADV Board.

I am a general dermatologist venereologist working at the Riga 1st hospital, where I also serve as a physician at the Psoriasis Centre. My main professional interests are inflammatory skin diseases, with a particular focus on psoriasis.

My active involvement with EADV began through my participation on the Academy's Ethics Committee, where I currently continue to serve as a co-opted member. This role has given me the opportunity to contribute to discussions on professional ethics and standards while collaborating with colleagues from a wide range of countries and professional backgrounds.

I consider EADV to be one of the most important unifying forces for our specialty in Europe and beyond. Being part of this organisation is a privilege that I deeply value. To me, EADV is not only a forum where dermatologists and venereologists come together, but also an outstanding platform for education, scientific exchange, professional collaboration and the pursuit of and celebration of excellence within our field.

What motivates me most as an EADV Board Member is the opportunity to strengthen collaboration among colleagues, promote lifelong learning and contribute to the continued development of our professional community. I believe that active engagement within EADV is both a responsibility and a privilege, and I hope to continue contributing to the Academy and our mission for many years to come.



Prof Dr Wolfram Hoetzenecker

Board representative of Austria

2026–2029

I am honoured to represent Austria on the EADV Board and contribute to our common European dermatological community. I studied medicine and molecular biology at the University of Vienna and subsequently completed specialist training in dermatology and venereology as well as allergology and clinical immunology. My academic and clinical career has also taken me to the universities of Tubingen and Zurich and to Harvard University in Boston, US, where I worked in the field of inflammatory skin diseases.

Since 2017, I have been head of the Department of Dermatology and Venereology at the Kepler University Hospital in Linz and hold the corresponding professorship at Johannes Kepler University Linz. My clinical interests encompass inflammatory skin diseases, allergology and immunology, dermatologic oncology and the management of complex and severe cutaneous reactions to systemic treatments.

My research focuses on translational dermatology and on understanding the mechanisms underlying inflammatory and rare genetic skin diseases. We investigate cutaneous immune pathways in disorders such as Darier disease, severe drug reactions and cutaneous lymphoproliferative diseases.

I have been closely involved in EADV educational activities for many years, particularly in the field of severe cutaneous adverse reactions and inflammatory skin diseases. As a Board Member, I would like to strengthen the connection between clinical practice, research and education. I believe that EADV has a unique role in bringing together clinicians and scientists, supporting the next generation of dermatologists and promoting collaborative research that ultimately translates into better care for our patients.

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 Jo Lambert

Board representative of Belgium

2025–2028

I am honoured to represent Belgium on the EADV Board and contribute to shape the future of dermatology. As Chair of the Department of Dermatology at Ghent University Hospital and a long-standing clinician, researcher and educator, I have always believed that the greatest advances in our specialty come through collaboration, innovation and shared purpose. My professional interests focus on inflammatory skin diseases, healthcare innovation and translating scientific discoveries into better patient outcomes. Throughout my career, I have been privileged to work with colleagues and organisations across Europe and beyond. These experiences have reinforced the importance of international partnerships in addressing the challenges facing dermatology today.

My journey with EADV has been driven by a desire to connect with dermatologists from different countries, learn from diverse perspectives and tackle common hurdles together. My active contribution as member of the Scientific Programme Committee (2022-2025) and now as Associate Editor of JEADV and chair of the Psoriasis Task Force, made me see great value in ensuring that every voice is heard and that expertise is shared across borders.

I am particularly passionate about bringing the principles of value-based healthcare into dermatology. I believe we should not only advance scientific innovation but also demonstrate and measure the outcomes that truly matter to patients. I believe that EADV provides a unique platform to unite our community, strengthen education, promote research and advocate for high-quality patient care throughout Europe and beyond.



Dr Slavomir Urbancek

Board representative of Slovakia

2026–2029

I am honoured to represent Slovakia on the EADV Board. As a long-time member of EADV, I consider the Academy to be a leading European professional organisation for dermatologists and related specialists.

After finishing my studies at the Faculty of Medicine, Comenius University in Bratislava in 1987, I passed the first and second specialty exams in 1991 and 1997 respectively and earned a PhD degree in 2004. I broadened my knowledge during four mid- and short-term fellowships in France (Paris, Nantes and Nancy). As a long-time chair of Department of Dermatology, F.D. Roosevelt Hospital in Banska Bystrica, I currently lead a team of younger passionate dermatologists. In addition to providing medical care, the department plays a role in the postgraduate training of residents. My areas of interest include interdisciplinary dermatology, contact and occupational dermatitis and dermato-oncology. I have been a board member of the Slovak Dermatology Society for many years, and I represent Slovakia in the European Union of Medical Specialists (UEMS) and Skin Inflammation and Psoriasis International Network (SPIN).

I consider dermatology a fascinating discipline. Over the years, dermatology has evolved from a relatively unappealing specialisation into one of the most respected fields. The Academy is primarily an educational institution. EADV undoubtedly represents an excellent platform for the exchange of scientific knowledge and its implementation in practice. As and EADV Board Member, I will strive primarily to motivate young dermatologists to make the most of what the Academy offers. I believe that international communication will surely strengthen the position and growing acceptance of dermatology.

2026
2027

EADV Face-to-Face Courses: The Largest Programme Yet!



With **44 courses planned for 2027**, EADV is set to deliver its largest face-to-face course programme to date. This represents a significant expansion from 21 courses in 2025 and 27 in 2026, reflecting the Academy's continued commitment to high-quality, specialised education and professional development.

2026

DECEMBER

Bacterial infections of the Skin
Olivier Chosidow
10–12 December
Paris, France

Rare Skin disorders in Pediatric Dermatology (Part II)
Christine Bodemer
10–11 December 2026
Paris, France

2027

JANUARY

Dermoscopy in Clinical Practice
Ahmed Sadek, Harald Kittler
14–15 January
Vienna, Austria

FEBRUARY

The Frail Face: Advanced Aesthetic Strategies & Safety Algorithms
Berna Solak, Ümit Türsen
4–5 February
Istanbul, Türkiye

Dermatology Without Borders
Valeska Padovese, Cristina Galvan
15–17 February
Valletta, Malta

Treatment of Common Skin Diseases in Children
Carmen Maria Salavastru
18–19 February
Bucharest, Romania

Visual Literacy for Dermatologists
Sarah Walsh
25–27 February
London, UK

MARCH

Non-Invasive Imaging in Dermatology
Mariano Suppa, Elisa Cinotti
8–10 March
Brussels, Belgium

CARD-EM: Drug Reactions for Residents
Saskia Oro
11–12 March
Paris, France

Confocal Microscopy: Integration in Clinical Practice
Salvador González Rodriguez
18–20 March
Madrid, Spain

Cutaneous Lymphoma
Marie Beylot-Barry
22–24 March
Bordeaux, France

APRIL

Understanding and Treating Nail Disorders
Bertrand Richert
1–3 April
Lisbon, Portugal

Skin Cancers Update
Ana-Maria Forsea
5–7 April
Bucharest, Romania

Therapeutics in Hair Loss and Hair Transplant
David Saceda-Corralo, Sergio Vañó-Galván
7–9 April
Madrid, Spain

Basic Surgery
Myrto-Georgia Trakatelli
14–16 April
Thessaloniki, Greece

Hair Disorders: Clinical Approach, Trichoscopy and Therapies
Lidiya Todorova, Nicolas Kluger
22–24 April
Plovdiv, Bulgaria

Psychodermatology: Mind-Skin Interactions
Asja Prohić
22–24 April
Sarajevo, Bosnia & Herzegovina

Climate Change and Dermatology
Bing Thio, Dennis Niebel
28–30 April
Amsterdam, Netherlands

Check our website for information about courses

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We look forward to having you onboard

Questions? Contact us at **membership@eadv.org**

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EUROPEAN ACADEMY OF DERMATOLOGY & VENEREOLOGY

Calendar of Events

2027

16th International Conference of the European Hidradenitis Suppurativa Foundation (EHSF) e.V.
3–5 February 2027 I Leipzig, Germany
Continue reading >

7th World Congress of Dermoscopy 2027
12–15 May 2027 I Lyon, France
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EADV Symposium 2027
20–22 May 2027 I Dresden, Germany
Continue reading >

8th World Psoriasis & Psoriatic Arthritis Conference
20–22 May 2027 I Stockholm, Sweden
Continue reading >

WCD2027 – 26th World Congress of Dermatology
21–26 June 2027 I Guadalajara, Mexico
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EADV Congress 2027
22–25 September I Amsterdam, the Netherlands
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11th International Congress: Psoriasis from Gene to Clinic
2–4 December I London, UK
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2028

4th World Congress on Rare Skin Diseases
05-07 April I Aix-en-Provence, France
Continue reading >

28th IUSTI World Congress
20-23 November 2028 I Cape Town, South Africa
Continue reading >

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