



THE BRITISH ASSOCIATION OF DERMATOLOGISTS

newsletter



VOLUME 23 NUMBER 4

WINTER 2020

Dermatology Global Health Day

e-Dermatology during
COVID-19

First thoughts from the CEO
Coping with the second wave

Embracing environmental
sustainability

The BAD Dermatology Global Health Day

8 October 2020

Chris Griffiths

University of Manchester, Manchester, UK

Tanya Bleiker

BAD President

Claire Fuller

Chelsea and Westminster Hospital

The BAD hosted the second Dermatology Global Health Day on 8 October 2020. This was a follow-up to the successful, ground-breaking event, initiated by its immediate Past-President Ruth Murphy, held at Willan House in October 2019.

The day-long virtual meeting was chaired by Claire Fuller (London) and Chris Griffiths (Manchester). Dr Fuller set the scene by describing the success of the first meeting and the evident enthusiasm of UK dermatologists for global health (GH) initiatives. This is placed in the context of the current COVID-19 pandemic, the escalating issues surrounding migrant health and showcasing projects which are beginning to make a real difference. Geoff Prescott (CEO, LEPPRA) discussed the effect of COVID-19 on international health charities such as LEPPRA. Early in the pandemic, there was a 90% reduction in leprosy cases presenting to LEPPRA clinics; this has now stabilised at a still significant 40%, primarily because of prejudice accentuated by the crisis. He described the “hidden calamity” in many rural villages especially in India. The charity’s workforce is predominantly working remotely, but teams cannot operate on a “war footing” for an extended period of time, particularly in the context of falling charitable income from private fund-raising. Professor Gail Davey (Professor of Global Health, Brighton; President of the Royal Society of Tropical Medicine and Hygiene, UK) reminded us that GH is neither a clinical specialty nor a discipline but is an interdisciplinary approach. Further, it is not a cipher for Tropical Medicine. There is an imperative to disentangle GH from its colonial origins, in other words, to decolonialise it. She laid out three main principles for success: (i) Equitable partnerships with local healthcare in that strategy should be planned together; (ii) Capacity strengthening to support and develop trainers and educators as well as health systems and institutions from Low- and Lower Middle-Income countries (LMICs); and (iii) the whole approach must be sustainable.

Lars French (President, International League of Dermatological Societies [ILDS]) informed us that the ILDS has 195 Dermatology Society members and is the voice for at least 200,000 dermatology specialists around the world. The ILDS is

in official relations with the World Health Organisation (WHO) and able to influence the agenda on non-communicable disease, non-melanoma skin cancer, Neglected Tropical Diseases (NTDs) such as scabies and the essential medicines list through its WHO Liaison Committee. Successful ventures supported by the ILDS include the Global Psoriasis Atlas, the International Foundation for Dermatology (chaired by Claire Fuller), the Regional Dermatology Training Centre based in Moshi, Tanzania and the DermLink grant-giving programme. Tanya Bleiker (BAD President) explained that GH empowers and rejuvenates dermatologists at all stages of their careers. There is a mutual benefit to the UK and the NHS by involvement with GH initiatives. A number of important initiatives have been launched by the BAD which include: a dedicated GH session at the BAD 2021 annual meeting; and Global Dermatology Bursaries for UK and overseas applicants to help and advance aspects of skincare in LMICs. She explained that the background of COVID and heightened awareness of racial discrimination had accelerated the BAD’s commitment to recognise diversity and equality, and as part of that, the Dermatology Lexicons Group and the Skin Diversity Subcommittee have been established.

The morning session ended with a presentation by Steve Walker (London School of Hygiene & Tropical Medicine) who provided an overview of a £5 million NIHR funded 4-year programme of work, focused on severe stigmatising skin diseases and NTD such as Buruli ulcer and Leishmaniasis in Ghana and Ethiopia – the Skin Health Africa Research Programme (SHARP). This will build on lessons learnt from field studies in Liberia and Côte d’Ivoire. In essence, skin health is public health. Dr Walker described an innovative programme to achieve these goals by structured training of mid-level healthcare workers. His comment about COVID further marginalising already marginalised groups resonated strongly.

The afternoon session comprised updates on a variety of key projects. Valeska Padovese (Valetta, Malta) outlined the developing migrant healthcare and humanitarian crisis unfolding in Europe as a consequence of large numbers of externally displaced people fleeing persecution and violence. Malta has

borne the brunt of the waves of refugees. Dr Padovese described the important role of dermato-venereologists in diagnosing and treating STIs, scabies, skin infections, pediculosis (Figure 1) and non-communicable disease noting the impact the closure of ports of entry in Malta and Italy due to COVID-19 had on disease acquisition. The migrants in the Maltese camps primarily had infectious skin disease; the presence of extensive Tinea corporis should raise concerns about underlying HIV infection.



Figure 1. Pediculosis in a West African immigrant in Malta

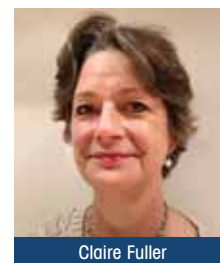
Su Lwin (StR St John’s, London) provided an update on the Burma Skincare Initiative (BSI) that she co-founded in 2018. The overall vision is to remove barriers to skincare access in Myanmar (Burma) – a country of 53 million people with poor healthcare, particularly for the rural and urban poor, and the 600,000 internally displaced persons including orphans of the civil war. The BSI now has charitable status and has made considerable progress in achieving its strategic goals, including establishment of travel and exchange fellowships for Myanmar dermatologists and ad hoc clinics at orphanages in central Myanmar (Figure 2). She thanked the BAD for its help in organising the first ever international dermatology meeting in Myanmar, comprising one day dedicated to the nurses. Eminent members of the BAD, including then-President Ruth Murphy, spoke at the events in February 2020.



Chris Griffiths



Tanya Bleiker



Claire Fuller



Figure 2. Dr Su Lwin and Prof Chris Griffiths – ad hoc skin clinic for orphans in central Myanmar

The overall long-term goal of the BSI is to establish a Regional Dermatology Training and Research Centre in Myanmar.

Sara Brown (Dundee), a prior recipient of a BAD Roger Harman Travelling Fellowship for her work in Uganda, is now awaiting the COVID crisis to subside before she takes up a second such award to continue this work. Professor Brown

explained that relatively little is known about atopic eczema in Uganda and differential diagnosis is difficult. There is emerging evidence that the prevalence of atopic eczema is increasing in the country although its genetic risk in Africa at large is unknown. Carrie Kovarik (Philadelphia, USA) discussed how COVID-19 had brought the global dermatology

community together, particularly with the harmonisation of national and international registries on COVID-19 and its cutaneous manifestations. Dr Kovarik outlined the detrimental effect of the pandemic on many NTD programmes. She also articulated the important role of teler dermatology both locally and abroad, and distance education for LMICs citing an example in neurosurgery which provided for bidirectional knowledge exchange.

The final presentation of the meeting was by Sidra Khan (StR, Manchester) who presented an update on her establishment of skincare clinics in Cox's Bazar, Bangladesh, the world's largest refugee camp (800,000 Rohingya people). She explained how it had led to the realisation for a need to foster training, education and mentorship programmes for dermatology trainees around the world particularly in LMICs. To that end she has established the necessary infrastructure for this vision to be realised. This has now been incorporated into GLODERM (International Alliance for GH Dermatology) where she chairs the trainees' committee and has established a series of bimonthly expert dermatology seminars for trainees from LMICs (Figure 3).

Chris Griffiths provided a summary of the day and thanked the speakers for their excellent presentations, the delegates for their contributions to the Q&A sessions and the BAD for its strong support for GH dermatology.

Hair Disorders by Prof Ncoza Dlova and Dr Refentse Thobye (Sept) – 88 attendees from five continents!

"Got to know about CCCA which is rare in our part of world"



"Combined presentation by trainee and specialist"

"The entire presentation was very interesting and high yield"

Figure 3. Screenshot of the first Dermatology Seminar for trainees from Low and Lower-Middle Income countries run by Dr Sidra Khan and the International Alliance for Global Health Dermatology

