22nd World Congress of Dermatology, Seoul, Korea, 22–29 May, 2011

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The 22nd World Congress of Dermatology (WCD) is now over and Kristian Thestrup-Pedersen gives below some glimpses of the interesting content. Please mark the next WCD in Vancouver in May 2015 into your calendar (www.derm2015.org).



The Korean Dermatology Association hosted the World Congress of Dermatology on 22–29 May, 2011 in the COEX Center, Seoul, South Korea (Fig. 1). The congress organization was magnificent, and could not have been better. As is the Korean way, the event was run with precision and generous hospitality. All aspects were covered, even down to the provision of golf car services to save attendees from long treks around the huge congress centre.

COEX is equipped with the most up-to-date technology, wi-fi and all other facilities. And, just across the street, the Bongeunsa temple is a living and working temple where people come to worship (Figs. 2A and B). Thus, one could stroll between "genes and diseases" and "moments of mind"; I chose to do both.

At the congress there was plenty of news. A world congress is a 4-year summary of what has been achieved since the last gathering. I cannot give a full summary here, as I was one of more than 11,000 attendees, but I can provide a few impressions.

Certain areas in our specialty are standing still: In contact dermatitis and atopic dermatitis, there is nothing really new, which is rather depressing as these areas are clinically so prominent. What about acne, hair and psoriasis? Well,



Fig. 1. COEX Center in Seoul, a magnificent and very large congress centre, with hotels nearby.

kinase inhibitors are now being tested in psoriasis and there is optimism about this.

I was impressed by a number of subjects, as follows.

Arthur Sober from Harvard, USA, gave an excellent review on melanoma in a "What's New" session, presenting data on a new device called MelaFind, which is a handheld machine about the size of a hair-dryer that has a specificity of 98.3% for melanoma, compared with 71% by a dermatologist. The US Food and Drug Administration (FDA) is considering its approval, which means that any beauty parlour will be able to buy one; forget the dermatologist!

Arthur Sober and Stephen Wagner from Vienna, Austria, provided interesting news on better treatment options for melanoma, in the form of an antibody treatment (ipilimumab), which can prolong life in patients with metastatic melanoma by an average of 3.5 months. The treatment carries many side-effects and costs approximately \$100,000 US per patient. There are also studies on two JAK kinase inhibitors. Thus,





Fig. 2. The view from Bonguensa temple towards A) the COEX Center and B) Buddhist worshippers at the temple.

there are significant achievements in metastatic melanoma. Kinase inhibitors might well be at the centre of future treatment modalities. This field is all about secondary signalling mechanisms, which are also intensely studied in psoriasis according to *Lars Iversen* from Aarhus.

Another of my conference highlights was listening to *Magnus Nordborg* from Lund, Sweden, who is now divided between La Jolla and Vienna, where he heads a section at the Gregor Mendel Institute. Magnus is a typical Swede, tall, and thin, with arms waving as he presents his thoughts. And, here is the news: he is studying how "genotype" influences "phenotype". It was a philosophical lecture. He has chosen a plant, *Arabidopsis thaliana*, which he can grow by the thousand. This plant has a rather limited gene size (which, of course, is fully analysed). He can then change its environment and look at the gene expression, answering questions such as "What happens when the sodium concentration is increased?", "What happens if the temperature is increased?", and so on, in order to determine how environmental influences can change gene expression and thus phenotype.

Pityriasis rubra pilaris (PRP) is a disease we have all heard of but seldom see. I can show you a picture of this condition, with kind permission from the patient. The patient was previously completely healthy, with no psoriasis in his family, when he suddenly began to shed skin (Fig. 3). Thus, some genetic changes must have occurred in the epidermis. Skin shedding is related to ichthyosis. I attended workshop 76 on ichthyosis, where investigators from all over the world presented most interesting results. Genes are involved and well described. So,



Fig. 3. Pityriasis rubra pilaris, which developed suddenly in a man who had previously been completely healthy. The disease had been present for 2 years when this photo was taken. (Published with permission from the patient.)

why does PRP arise suddenly? Many years ago I was told that if you place a certain strain of Candida albicans cell in the middle of a Sabouraud agar plate, after 20–30 cell doublings it will suddenly express an "adhesion molecule" (probably a sugar) such that the cell makes a ring on the plate, and then this event is switched off. This is something for Magnus Nordborg (or colleagues) to study. Is there a time-course involved in gene regulation that could explain why PRP is a sudden "ichthyosis"?

Many companies set up impressive exhibitions at the congress. Amongst these exhibitions, cosmetics has become increasingly prominent. One of the few companies still concentrating on "dermatology" is LEO Pharma, for which I congratulate them. They have a new plant compound, ingenol mebutate, which has shown interesting results in treatment of actinic keratosis.

During a world congress general assemblies are held to discuss past events and to make plans for the future. Here, the board of the ILDS has been active in promoting world skin health. Roderick Hay is President of the International Foundation of Dermatology and steers programmes in the developing world. And, thanks to our Nordic bid for a world congress in Copenhagen 2002, a bid that we lost, but from which ILDS and IFD will benefit, good funding has been secured for this work, as half of the economic surplus of a world congress goes into promoting global skin health.

An exciting part of a general assembly is the bid for the 23nd World Congress of Dermatology and the election of new board members for ILDS. There were four cities bidding: Bangalore, Rome, Vancouver and Vienna. Vancouver won the first round, with 54% of the votes, followed by Rome (27%), Vienna (13%) and Bangalore (6%). The Canadian Dermatology Association was excited (President Jeffrey Shapiro and General Secretary Harvey Lui). The congress will be held in May 2015, so make a note in your diaries.

Wolfram Sterry from Berlin was appointed president of ILDS for the next 4 year. This is a wise choice and I congratulate him on his appointment. The members of the new board are listed in Table I.

Table I. The new ILDS board

Francisco M. Camacho-Martinez
Roderick J. Hay
Abdul-Ghani Kibbi
Hee Chul Eun
Yoshiki Miyachi
Jorge Ocampo-Candiani
Marcia Ramos-e-Silva
Jean-Hilaire Saurat
Wolfram Sterry

Mary E. Maloney
David Pariser
Jean Bolognia
Jerry Shapiro
Harvey Lui
Hemangi Jerajani
Chung-Hong Hu
Christopher Griffiths
Xuejun Zhang



Fig. 4. Professor Hee Chul Eun with his wife (left) and Mrs Grethe Thestrup (right) presenting beautiful dresses from their own cultures. As a simple man in a dark suit, I admire both ladies for presenting the epitome of women's art.



Fig. 5. Professor Klaus Ejnar Andersen, Grethe Thestrup and chief physician at Gentofte, Claus Zachariae at the President's Dinner in Seoul.



Fig. 6. From left: Professor Roderick Hay, President of the International Foundation of Dermatology, my wife Grethe in her 200-year-old national dress from Toreby, Lolland, and Margathe and Robin Marks from Melbourne, Australia. Robin has also been president of ILDS 2002–2007 and has done a fantastic effort for world dermatology, being the president of the World Congress of Dermatology in Sydney, 1997.

As an ILDS board member I had the pleasure of being invited to the President's Dinner. In his invitation congress president *Hee Chul Eun* encouraged guests to dress in their national costume. After some gentle persuasion my wife, Grethe, presented a dress from 1800 from a small area in Lolland, Denmark. Thus, Korea (Mrs Eun) and Lolland (Mrs Grethe Thestrup) met over beautiful national costumes (Figs 4–6).

It was good to participate in this congress. There was an active Nordic presence, and I congratulate all young participants. The next one to aim for is the Vancouver congress (Fig. 7), and you should consider how to improve your presence there. I will contact the Nordic societies with some suggestions.



Fig. 7. Jeffrey Shapiro, President, and Harvey Lui, Secretary General of the forthcoming $23^{\rm rd}$ World Congress of Dermatology, May 2015, Vancouver, Canada.

I have been on the ILDS board now for 14 years, during which time I have worked to support developments in skin health worldwide. As mentioned, the Nordic bid has made a significant impact, and I thank Anders Vahlquist for his strong support in this.

Nordic dermatologists provide a good service to our countrymen, maintaining a very high standard in our specialty. It is important that our young colleagues continue to provide a high level of service, or perhaps improve it. As our populations grow older – leading to difficulties for any pension funds, including my own, that has been forced to reduce my pension by approximately 25% as I am getting "too old" – so will dermatology change, and skin cancer especially will be an increasing problem in our communities.

Well, this ends my ILDS days, but make a note of the 7th Georg Rajka Symposium on 15–18 January, 2012, in Moshe, Tanzania, at the Regional Training Centre of Dermatology. The centre has a view of Kilimanjaro. Why not give yourself a Christmas present and sign up for a symposium on atopic eczema and a safari? As Elvis Presley sang: "It's now or never".

I hope you all had enjoyable summer holidays.