ILDS - ICD - IFD - RDTC What do they stand for?

ILDS is the International League of Dermatological Societies, which was founded in 1929. To date, membership consists of 95 national societies of dermatology and venereology and 22 affiliated (international) societies.

The aims of ILDS are:

1. To stimulate co-operation between societies of dermatology and venereology and societies interested in all fields of cutaneous medicine and biology throughout the world.

2. To encourage the world-wide advancement of dermatological education, care and sciences.

3. To promote personal and professional relations among the dermatologists of the world.

4. To represent dermatology and venereology in commissions and international health organizations.

5. To organize world congresses of dermatology (WCD).

ICD stands for the *International Committee of Dermatology* and is the board of ILDS, running the day-to-day business. Activities are concentrated up to and just after WCDs, but the board meets yearly – often in association with international meetings. The last board meeting was on January 9-10, 2001, in Moshi, Tanzania. A more detailed account of this visit is given in an article in this issue (p. 31).

IFD, the *International Foundation of Dermatology*, is a sub-committee of

the ICD. It was formed in 1987 at the Berlin WCD. It has the specific aim of improving skin health in developing countries. Its first President was Dr. Alfred Kopf from New York (1987– 1997) and its present President is Professor Terrence Ryan from Oxford, UK.

Two projects have been initiated: establishing the *Regional Dermato-logy Training Centre* (RDTC) in Moshi, Tanzania, and initiating a training programme for nurses in skin health care in Guatemala. The latter project did not have a favourable outcome, but the RDTC in Moshi is a major success (see separate article).

RDTC's principles are:

1. To educate health assistants from African countries by giving them a 2year training course (10 months each year) in Moshi, Tanzania, where they have lectures and courses on all relevant aspects of dermatology and sexually transmitted diseases,

2. To provide skin health care to the local community within the framework of the Kilimanjaro Christian Medical School, Tumaini University.

The medical staff of RDTC consists of Dr. Henning Grossmann, a dermato-venereologist from Ger-many, Dr. Barbara Leppard, a dermatologist from London, and Dr. John Masenga, a native of Tanzania and trained in the UK. These consultants work as teachers and supervisors for the students, of which approximately 20 participate at a given time. Also, several guest lecturers and medical students pay visits to the RDTC. In addition. there is a large staff of nurses and secretaries, who are supported economically by the Ministry of Health in Tanzania. In this way, 60% of the funding of the RDTC and its activities stems from the Tanzanian government in its support of the Kilimanjaro Christian Medical Center, of which RDTC is a significant part. The remaining funding is created via the IFD through the hard work of its presidents and committee. The approximate annual budget needed via IFD channels is just over 300 000 US dollars.

So far economic support has been obtained. After 10 years of existence, the project is clearly a success regarding education and health provision. However, the economic support is still very dependent on donations. Major contributors are the German government, the British Association of Dermatology, many leprosy charity funds, the Italian Rotary Club of Florence, AAD, EADV, and the Nordic Dermatology Society. In making the Nordic bid for the WCD in 2002 we promised to give 1/3 of the surplus directly to the IFD. So did the winners - the French Derma-tological Society. The ICD board plans to suggest to ILDS that future world congresses of dermatology give half of the surplus to support improvement of skin health in developing countries world-wide.

The first president of IFD, Dr. Alfred Kopf (see picture), has established an IFD Endowment Fund, which by now has reached 114 000 US dollars. The money is invested by the AAD, and



Fig. 1. Dr. Alfred Kopf sitting in one of the consultation rooms at the Regional Dermatology Training Centre.

its annual revenue is split into two equal parts, one part going back to the fund, while the other is given directly to RDTC. The vision of Al Kopf is to accumulate between 10 and 20 million US dollars, thus allowing the RDTC to become self-supporting. Any dollar given to the IFD Endowment Fund will thus go to support dermatology and venereo-logy. No amount is too small. On behalf of Al Kopf, who has put enormous efforts into the growth of the RDTC, I urge Nordic dermatological societies and Nordic dermatologists to consider a donation, small or large. Here is how to go about it.

Make out the cheque to INTERNA-TIONAL FOUNDATION OF DERMATO-LOGY and send it to Alfred W. Kopf, M.D., 350 Fifth Avenue, Suite 7805 New York, NY 10118, USA. Phone (+1)



Fig. 2. The ICD and IFD board meeting in Moshi, Jan 9-10, 2001. First row from left to right: Robin Marks, Takeji Nishikawa, Coleman Jacobson, Henning Grossmann, Terrence Ryan, Ramon Ruiz-Maldonado, Steve Katz. Second-third row from left to right: Jean Revuz, Alan Cooper, Roderick Hay, Jean-Paul Ortonne, Jean-Hilaire Saurat, Georg Stingl (top), Alfred Kopf, Donald Lookingbill, Andreas Katsambas, Hans Rorsman and Kristian Thestrup-Pedersen. Three members of the ICD were not able to participate: Benvenuto Gianotti, Ana Kaminsky and Jose Mascaro.

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Conclusion

I am sure every Nordic dermato-venereologist can agree with the aims and goals of the ILDS. The field of dermatology and venereology is very well developed in the industrialized part of the world, but in continents like Africa, there is much that is lacking in health care within our speciality. Specialists are scarce and some countries are completely without a specialist in dermatology and venereology. Therefore, the RDTC center is an efficient way of improving skin and STD health care for the people of Africa. We need to support them and I urge colleagues in the Nordic countries to do so.

Further reading:

Nordlund JJ. A visit to Eden: Living and working at the Regional Dermatology Training Centre in Tanzania. J Am Acad Dermatol 2000;43:1101–08. Visit the ILDS web site: www.ilds.org.

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