

In This Issue

Euromelanoma 1-2

Patients with Hereditary
Angioedema call for im-
proved access to available
treatments 2-3

Combating Occupational
contact dermatitis: a Eu-
ropean initiative 3

HIV is here to stay – get
used to it! 4

About the European
Academy for Dermatol-
ogy and Venereology
(EADV): Profile & Mission 4

Announcement: Future
EADV Meetings 5

EUROMELANOMA 2011 - “SOS: Save Our Skin”

No one will contradict us when we affirm that holidays are important and a delicious moment of relaxation. During our holidays, we are often outside for sightseeing, hiking, walking, swimming, sunbathing or many other activities. We especially want to travel to places with abundant sunshine. All this leads to an exposure to powerful sunlight and to the risk of sunburns, with or without blisters!

There are even long-term dangers to which we give little consideration such as premature ageing of the skin, wrinkles, disfiguring spots on our faces, scalps (for bald men), neck line (for women), arms and legs. The risk of skin cancer increases according to the duration of sun exposure and to the number of sunburns, whether it occurred during the holidays or work. For the latter we refer to construction workers, postmen but also to the people who are exposed to the sun through windows, such as lorry drivers or airline pilots!

It is even more important to be careful when you can answer “yes” to the following questions on the risk factors:

- o You had sunburns with blisters during your childhood.
- o You have lived in the Tropics.
- o You have a fair skin that reddens easily when exposed to the sun and blond or red hair and freckles.
- o You have more than 100 moles, especially irregular ones.
- o You have in your family a member who has had a melanoma and you already had one yourself.
- o You are a man with a fair skin and older than 50.

Therefore, SOS! Save your skin and treat it well, you only have one!

Above all, remember the following:

- Do not expose your children to the sun without protection.
- Protect your skin with clothing and broad-brimmed hats
- Protect your eyes with quality sunglasses.
- Apply sun cream with a minimum protection factor “30” (“50” for children)
- Spread sun cream EVERY two hours.
- Avoid exposure to the sun at its zenith, i.e. between noon and 4:00 PM.

In 2011, Euromelanoma will organise press conferences in airports and distribute prevention material to people travelling to sunny places.

On May 16th 2011, a free screening will be organized for the public in several countries. The screenings take place in hospitals, private practices or even in public places. The same questionnaire is distributed in all the participating countries. Last year, the questionnaire helped us collecting information from 60,000 patients throughout Europe. These data have been studied by Robert van der Leest and Esther de Vries at Erasmus University (Rotterdam). The data and results will be presented during the Melanoma Symposium at the 8th EADV Spring Symposium in Carlsbad, Czech Republic.

About Euromelanoma

Euromelanoma is a pan-European skin cancer prevention campaign launched in 1999 in Belgium. Now, 26 countries collaborate and work on these campaigns.

Every year, a new theme is chosen to promote prevention. This year’s goal is to provide information to people who will travel to sunny places and



will suffer from sunburns if they do not take care of their skin.

Our motto "Save Our Skin" uses the acronym "S.O.S." to point out the danger. It will be

associated with the picture showing the sun-burnt back of a young woman.

Our actions try to have a first prevention impact by giving information about sun exposure and the preventive measures, but they also have a second

impact by providing more information about how to detect melanoma and people at risk. For further information, please visit www.euromelanoma.org

Véronique del Marmol, MD PhD

Professor of Dermatology
Head of the Department of Dermatology
Hôpital Erasme

Route de Lennik, 808

1070 Brussels, Belgium

Tel.: +32 (0)2 555 46 12

Fax.: +32 (0)2 555 59 69

E-mail: v.marmol@skynet.be

Patients with Hereditary Angioedema (a Potential life-threatening Swelling disorder) call for improved access to available treatments

"Patients with Hereditary Angioedema continue suffering from painful, debilitating, and potentially life threatening swelling attacks despite the availability of effective treatment options," according to a report issued by Hereditary Angioedema International (HAEi) - the Global Umbrella non-profit organization that represents patients with hereditary angioedema (HAE).

The report, "State Of Management Of HAE in Europe" Facing up to Hereditary Angioedema,' reveals misdiagnosis, delays in diagnosis, and unsatisfactory treatment standards across Europe and Israel. Based on the report's findings, HAEi has issued a call to action that includes specific steps that are required to ensure that HAE patients have access to suitable treatment and therefore can lead a normal life. The report's conclusions were based on data gathered during a recent HAEi-sponsored Patient advocacy forum and the results of a survey conducted in 11 European countries and Israel. "HAE patients experience recurrent attacks (swellings) of different parts of the body, which in some cases, can be life threatening. There are treatments for HAE approved by EMA across EU but we have found extreme variations in availability and access. Patients in some countries have no access to available treatments, while patients in other countries have the opportunity to choose between a variety therapies. We are calling for action that will reduce the burden of HAE and raise patients' quality of life by providing access to the full range of available treatment options," says Henrik Boysen, Executive Director of HAEi. While HAE cannot yet be cured, intelligent use of available medication can help to prevent the onset of symptoms and effectively manage attacks. However, the report revealed that HAEis all too often under-recognized, under-diagnosed, and under-treated.

"HAE patients are not making unreasonable demands. Patients want to control their symptoms so they feel safe and are able fulfill their life's potential at school, work and in relationships. HAEi believes that every patient should have an individualized treatment plan that includes home treatment as a viable option. Our call to action formalizes what we consider basic patient rights," says Anthony J. Castaldo, President of HAEi.

Anthony J. Castaldo
President, HAEi
Email: a.j.castaldo@haei.org

About HAE

HAE is a rare and potentially life-threatening C1 Inhibitor deficiency disorder with symptoms of severe, painful and recurring attacks of edema (swelling) in airways, internal organs, face, hands and feet. The condition affects between 1:10,000 and 1:50,000 people worldwide, many of who suffer for years, often receiving unnecessary medical procedures and surgery, before learning an accurate diagnosis. Most attacks occur spontaneously with no apparent reason although factors ranging from anxiety to illness and trauma have been cited as triggers. Swelling of the throat and airways can result in death by suffocation and must be treated as an emergency with prompt medical attention. Almost all patients experience abdominal attacks that involve severe and excruciating pain, vomiting and diarrhea. Swelling in the face, hands feet and other body parts is extremely painful, disfiguring and debilitating. An untreated attack lasts between 24 and 72 hours and can go on for over a week.

About HAEi

HAEi – International Patient Organization for C1 Inhibitor Deficiencies – is a global non-profit organization dedicated to raising awareness of C1

Inhibitor deficiencies around the world. Our purpose is to join efforts and experience of the global HAE community to achieve optimal standards of care and treatment for HAE patients. Read more about HAE and HAEi on our website: www.haei.org

Combating Occupational contact dermatitis: a European initiative

Occupational contact dermatitis (OCD) represents up to 25 per cent of occupational diseases and can affect workers in almost all sectors and occupations. In Europe they are considered to be the second most common work-related health problem and are, according to the European Agency of Safety and Health at Work, one of the most important emerging risks related to the exposure to chemical, physical and biological risk factors. OCD cost up to € 5 billion per year due to loss of productivity. In the UK for example, costs amount up to £ 400 million and in Germany up to € 1,5 billion. Interestingly small- and medium-sized enterprises (SME) are more impacted as most of these costs fall on them. OCD furthermore causes extensive suffering for workers as it may result in detrimental socioeconomic and psychological consequences, including job loss and long-term unemployment.

As a consequence, in 2010, two important European initiatives were launched to tackle the challenges of OCD. The first pertains to the EADV pan-European "Healthy skin@work" campaign, which seeks to raise public and political awareness on the subject-matter at national level and in particular, to highlight what dermatologists can do in terms of OCD prevention, proper diagnosis (incl. patch testing) and adequate treatment. Subsequently, a series of national sub-campaigns were run in 2010, which will be replicated in 2011 with an even greater participation of national institutions joining the campaign.

The second initiative relates to an unprecedented research project called „Safe Hair“, granted by the EU-Commission. The project, which incidentally was initiated by the hairdressing employers' and workers' associations, was run within the framework of the EADV „Healthy skin@work“ campaign. It aims at the prevention of OCD by defining common standards of safety and health in the OCD-high risk profession of hairdressing. It addresses the importance of implementing teaching curricula for apprentices' and masters' courses with a view to making adequate skin protection and skin care a habit in the trade from early on. As a result of a series of workshops, a scientifically guided consensus amongst all stakeholders, including the hairdressing employers' and workers' associations as well as suppliers and safety engineers,



EADV - EUROPREVENTION
CAMPAIGN: HEALTHY SKIN @ WORK

on the prevention of OCD has been achieved. In September 2010, an agreement, the Declaration of Dresden, was signed by the European social partners in the hairdressing trade as a unique and voluntary commitment to the prevention of OCD. Prof. S. M. John, coordinator of the EADV-campaign and of the research project: "It is remarkable that this is the first such EU-initiative in the field of OCD. Now, that the outcome was successful we hope that other branches at risk will follow with similar voluntary agreements by the social partners." Indeed, branches affected by OCD are increasingly getting aware of the disease burden and that dermatology can offer a solution. A second phase of the project is planned in order to scientifically guide the implementation at national level of the recommendations laid down in the Declaration of Dresden.

Swen Malte John, MD

Coordinator EADV "Healthy Skin@Work"/europrevention Campaign
Chairman EADV Task Force on Occupational Skin Diseases
Chairman German Task Force on Occupational and Environmental Dermatology (ABD) within the German Dermatological Society (DDG)

Professor and chairman
Dept. Dermatology, Environmental Medicine,
Health Theory UNIVERSITY OF OSNABRUECK
Sedanstrasse 115 (D1),
D-49069 Osnabrueck, Germany

phone: +49-541-405-1810
fax: +49-541-969-2445
cell: +49-160-94548312
e-mail: sjohn@uos.de

HIV is here to stay – get used to it!

The numbers of new cases of HIV continue to increase at alarming rates throughout Europe. The condition is not as “obvious” now as it was 20 years ago when high profile celebrities were dying with lots of media coverage. Now most patients can be managed with anti HIV drugs and get back to work if diagnosed early enough. But therein lies the problem! Early diagnosis is not happening. Almost half of new HIV positive diagnoses are in patients who have had the infection for years but have never been tested.

Even when patients become unwell doctors are still not considering HIV in the differential diagnosis. We see many cases of patients who have been attending doctors with various conditions that should have raised the possibility of HIV but the opportunity of HIV testing was missed. When the patient finally becomes seriously unwell the diagnosis is usually made but by then there is significant immune system damage that can never be recovered fully. Also, the patient may now have unknowingly passed the virus on to loved ones. As dermatovenereologists we are ideally placed to make early

diagnosis, as many patients present to sexual health clinics for routine check ups and as dermatologists we often see early signs of HIV as it always causes skin problems i.e. shingles, seborrhoeic dermatitis, worsening eczema or psoriasis, multiple or giant molluscum contagiosum etc.

So the EADV wish to highlight the ongoing HIV problem and bring to the attention of the public and doctors that early diagnosis is essential. This can only be achieved by greater awareness of manifestations of HIV and normalising HIV testing so it becomes routine in any sick patient – irrespective of their sexual orientation.

Dr. Colm O’Mahony MD

Department of GUM and HIV

Countess of Chester Foundation Trust Hospital

Liverpool Road

Chester, CH2 1UL

Email: colm.omahony@coch.nhs.uk



Shingles



Seborrhoeic Dermatitis



Giant Molluscum Contagiosum beside the nipple in a patient with HIV. A ‘normal’ small Molluscum is also present

About the European Academy for Dermatology and Venereology (EADV): Profile & Mission

The EADV is a non-profit association, founded in 1987, whose mission is to advance excellence in clinical care, research, education and training in the field of dermatology and Venereology and to act as the advocate and educator of patients particularly those with cutaneous or venereal diseases. EADV organizes annually one main congress in one of the European capitals and one spring meeting, offers training, fostering courses and online teaching for CME.

The mission of the Academy is

- to advance excellence in clinical care, research, education and training in the field of dermatology and venereology.
- the funding and the operation of an Academy with the function of providing the highest quality of advanced medical training in Dermatology and Venereology and related fields of medicine, science and research.
- the promotion of the highest standards of clinical care in the aforementioned specialties.

- to be concerned with supporting the maintenance and enhancement of high standards in professions related to Dermatology and Venereology and public health services and other professions or practices that the Academy may from time to time consider relevant.
- to act as the advocate and educator of patients particularly those with cutaneous or venereal diseases.
- to prepare, edit, publish and circulate such papers, books, journals or other literary or electronically based matter as may seem conducive to the objectives of the Academy.
- to carry out such other lawful activities as may be incidental to or conducive to the attainments of the objectives of the Academy.

Announcement: Future EADV Meetings

8th EADV Spring Symposium

Carlsbad, Czech Republic, 14-17 April 2011.
More information: www.eadvcarlsbad2011.org



20th EADV Congress

Lisbon, Portugal - 20-24 October 2011
More information: www.eadvlisbon2011.org



9th EADV Spring Symposium

Verona, Italy - 6-10 June 2012
More information: www.eadvverona2012.org
(soon available)



Experts at your service

EADV supports journalistic work with a free press and media service on request. A pool of scientific leaders, specialists in dermatological treatment with clinical background or residents working in dermatological practice is at your disposal to answer questions. Upon request, you will receive a specific response to almost any question on skin or hair. Support covers mass media and special titles equally.

The experts and interview partner mentioned in this InfoSheet can be contacted through the EADV Media & PR Committee (Contact person: alexandre@eadv.org).



EUROPEAN ACADEMY OF
DERMATOLOGY AND VENEREOLOGY /
ACADEMIE EUROPEENNE DE
DERMATOLOGIE ET DE VENEREOLOGIE

A non profit association / Association
sans but lucratif

EADV Info Sheet

The EADV Info Sheet is a publication of
the European Academy of Dermatology
& Venereology

Editor: Dr. Colm O'Mahony
Technical Editor: Juliane Peterhansl
Coordinator: Alexandre Dewaide

EADV (Headquarters)
Via delle Scuole, 12
CH- 6900 Lugano, Switzerland

EADV (Succursale belge)
Avenue General de Gaulle, 38
B- 1050 Brussels, Belgium

Website: www.eadv.org

Layout / Coordination content:
ART.media Public Relations
Juliane Peterhansl
Stromstrasse 4
10555 Berlin – Germany
Tel. +49 (0) 30 - 7 40 74 47 - 46
juliane_siegling@art-media.eu

R e p l y F o r m

Please return to Alexandre Dewaide
by e-mail (alexandre@eadv.org) or by fax to the
following number: + 32 2650 00 98.

Yes, I would like more information on the contents of this issue :

Please send me a Press Release on: _____

Please send me a Fact Sheet on: _____

Please put me in direct contact with an EADV expert on:

Further remarks

Contact details

Name: _____

Street: _____

Post Code: _____ City: _____

Country: _____

Tel: _____

Fax: _____

E-mail: _____