In Memoriam

Albert Montgomery Kligman, MD, PhD, Dr. hc mult.

On 17 March 2010, better known to the Irish as St. Patrick’s Day, Albert M. Kligman would have celebrated his 94th birthday. Following a short illness he died, surrounded by his immediate family on 9 February 2010 in Philadelphia.

Albert, as I will address him from now on, was one of the pioneering giants of American dermatology of the 20th century. His name is a legend. The sad notice came like a shock to the international family of dermatologists, evoking sadness and tears.

Albert was one of our heroes and idols, a monolith of our beloved specialty, and a winning champion. Whenever and wherever he showed up, he was in the focus of attention. Announced as a speaker at conferences, the rooms or halls were packed. The audience looked up to him. Nobody else was embraced or hugged so often and with love than he.

Let us take a look at his background and early career. His parents were immigrants from Eastern Europe. Albert was born in Philadelphia; as a youth he realized that his family had not enough money to pay for his college education. Luckily he was supported by a rabbi, a story which he often mentioned with gratitude. Except for the time in college at Pennsylvania State University he never left Philadelphia, his beloved city. At Penn State, he earned a PhD in botany with emphasis on mycology, helping explain his tremendous love for nature and plants. Fortunately for us he decided to study medicine and graduated from the University of Philadelphia. Attracted by Professor Donald Pillsbury, then Chairman of the Department of Dermatology, he entered his program and never left the institution.

All his life he was a keen investigator, restless, daring, with a sharp and sometimes feared tongue, often taking unconventional roads. He never became Chairman at Penn, instead serving under four leaders: Donald Pillsbury, Walter B. Shelley, Gerald Lazarus, and John Stanley. Unburdened by administrative constraints, he could put all his energy into research, teaching and breeding of new intellectuals. The license plate of his Mercedes reads: DR SKIN, applauded by many in the streets.

When the old and famous ivy-covered Duhring Laboratory brick building was still in existence, Albert occupied a tiny office, rolling about on a black worn-out swivel-chair. This was his empire, his cockpit. Here he produced and refined his ideas, advised numerous colleagues, including research fellows the world over, consulted with industry, and entertained anyone who wanted to be near the guru. Notable was the small plywood cabinet above his desk. The inner circle (including the night guards) new about the secret and helped to empty the spirits of the Jack Daniels stored therein.

Albert produced a legendary array of original papers, spanning the field of dermatology from acne, bacteriology, contact dermatitis, mycology and photobiology to retinoids, just to name but a few interests. He has written or co-authored wonderful books, carrying his fame into all continents. Above all he was a truly gifted writer, precise, memorable, witty and occasionally heavily pointed.

Such rich harvest was inevitable followed by many outstanding distinctions and honors. He was especially fond of his appointments in the Society for Investigative Dermatology, serving as Vice President and President, culminating in the award of the Stephen Rothman Award. Internationally he was honored by a Doctor honoris causa from the University of Utrecht, Netherlands, and the Heinrich-Heine-University, Düsseldorf, Germany. A Festschrift was issued in his honour (Archives of Dermatological Research 272, No. 3–4, 1982).

Albert spent his long, successful and enriched life in the triangle between the University of Pennsylvania and its research facilities; his home in a high-rise laboratory brick building was still in existence, Albert’s home in a high-rise building.

Albert and Lori were always philanthropists in the broadest and best sense. They generously made major donations to educational programs of students and residents, research projects and museum collections. Even at this sad time, all of us who knew Albert, should rejoice, be happy and proud to have known him, influenced by his genius and shaped by his vibrant personality. Let us come together sometimes in the future when we are called to Philadelphia to honor and keep alive the many facets of Albert, a real mensch who touched the hearts of many.

Gerd Plewig, Munich
VANCOUVER 2015
XXIII WORLD CONGRESS OF DERMATOLOGY
www.derm2015.org

International Foundation for Dermatology
www.ifd.org

Whirlwind February in Canada!

Despite warmer than usual temperatures on the west coast of Canada, Vancouver and Whistler showcased the beauty and supernatural British Columbia during the 2010 Olympic Games. The energy in Canada has been amazing with thousands of international visitors and hundreds of cultures and languages blending in with smiling faces and open arms. Congratulations to all the athletes who competed!

The legacy and new venues and sporting facilities left behind the Olympics will benefit all groups visiting Vancouver in the future. The Olympic cauldron with a backdrop of Coal Harbour and the Majestic snow-capped mountains will stand as a permanent fixture, located beside the Vancouver Convention Centre – where Canada hopes to welcome and share his amazing energy with the World Congress of Dermatology delegates in 2015.

It’s hard to believe that in only one year, we will be gathering with our friends and colleagues in Seoul, Korea at the 2011 World Congress of Dermatology. Good luck to the Korean organizing committee in this last year of planning the Congress.

Jerry Shapiro, President
Harvey Lui, Secretary-General
Larry Warshawski, Bid Director, CDA Liaison
World Congress of Dermatology Vancouver 2015
Bid Committee

IFD Update

The International Foundation for Dermatology (IFD) was established over 20 years ago by the International League of Dermatological Societies (ILDS), the organisation that provides a global forum for the world’s dermatology societies by, for instance, organising the World Conferences of Dermatology or through its formal links with the World Health Organisation. It is now based in London in the offices of the League, where we have a part time administrator and volunteer staff. The IFD was developed in response to the recognition that, in many parts of the world, there was little care available for patients with skin problems, often because there were no, or too few, dermatologists or where the local health care depended on health care workers with little training in the management of skin disease. This unsatisfactory situation was compounded by the fact that, in these same areas, skin disease was often very common being among the top three most frequent reasons for an individual to seek medical help. So from its outset the Foundation was faced with a challenge to develop new approaches to reach the maximum number of patients utilising clinical or nursing help appropriate to the local conditions and health services.

The chief operating objective of the International Foundation for Dermatology is to improve dermatological care in underserved areas of the developing world, but this remit covers not only skin disease but also sexually transmitted diseases and leprosy. The concept of dermatological care is broad as, in addition to the management and control of common diseases, it also includes recognition of conditions that present with skin signs and symptoms including those with serious implications for health. So early recognition of disease states such as HIV or onchocerciasis through their skin presentations and knowledge of pathways for care that are followed in these diseases form part of the work of the IFD. The intention is to promote the provision of better services in areas where skin or sexually transmitted diseases are both common and poorly managed through lack of trained personnel or resources, frequently both. To place this work in perspective, all this is set against the backdrop of international bodies such as the World Health Organisation with their many regional health departments. Again research carried out by this group has provided a unique insight into the risk and prevalence of skin diseases in poorer countries. No model works in every environment and so these local groups have tried to adapt initia-
tives to the most practical and effective in each environment. Both the latter programmes are based on short periods of training of one or two days. There are other differences. For instance in Mexico rural health care is often delivered by newly qualified doctors, trainees, and these become the focus for training. We are currently investigating the possibility of helping another programme in Cambodia together with a German dermatologist, Christoph Bendick, who has spent the past 20 years in the country and who has developed a diploma course in dermatology for local general medical officers and who is currently in the process of developing a new training scheme for specialists together with the national university in Phnom Penh. The IFD's work includes support of other initiatives such as training in community dermatology (Patagonia) and needs assessment for skin care (North India). None of these schemes would have been possible without the work and dedication of a large number of individuals, who often work voluntarily; the Foundation's role has been to initiate, where appropriate, support, advise and help in ways that suit each programme.

While these training initiatives have provided a bedrock for the work of the IFD, with time other lines have been developed to strengthen the overall goal to improve the care of patients with skin disease, including advocacy and needs assessment and links with other organisations with interest in health work in poor regions. One such project is a link with Médicins sans Frontières where volunteers in remote areas can seek advice and support for the care of patients with skin problems using a system established through the University of Zurich. Likewise, in partnership with the American Academy of Dermatology, we are addressing the needs of simple education by provision of treatment and diagnostic guides for the commonest of conditions which can be used by front line health workers. The challenge has been to provide simple teaching aids that can be adapted to different regions and languages. A further programme is a new collaboration with WHO and Merck to investigate the potential for control of scabies in areas where it is endemic and very common. Scabies in such areas is associated with severe complications, due to secondary bacterial infection, including nephritis and rheumatic fever as well as infant septicaemia. At present the partnership is investigating the potential for effective interventions.

There is a great deal to do and therefore raising the funds has become a major focus of work. Most of our current funding comes from dermatology societies together with invaluable contributions from industry and individual donors. The IFD has designed and printed its own fund raising materials which are being used to generate the support for the work described here and to widen the programmes. However we are delighted that the work of the Foundation was recognised recently as the IFD was awarded the Astellas Changing Tomorrow Award for 2009. This has enabled us to take on other programmes of work.

In furtherance of this work combining forces with the Community Dermatology Journal, initiated this year, provides a key step in helping to promote continuous education for all involved in the care of patients with skin problems and as a forum for discussion of dermatological issues relevant to the care of patients in low income countries. We are delighted that the first issue, as a joint venture, was published in 2009 and we are anticipating expanding the circulation of the Journal, as well as recruiting more authors for future issues. In promoting this work we recognise that health care workers from different backgrounds including dermatology, leprosy, nursing, primary care, public health, occupational therapy, to list but a few, all make contributions that are immensely valuable. In turn we hope that the Journal will be useful to all these groups as a forum for debate, education and for the advancement of the field.

**Dermlink 2009 Report**

A new rural health programme for skin disease in Patagonia

Following receipt of a Dermlink programme award in 2009 for training and preliminary work in dermatology needs assessment in collaboration with Dr Roberto Estrada in Mexico, Dr Isabel Maria del Pilar Casas, a young dermatologist from Junín de los Andes, Neuquén Province, southwest of Argentina, has developed an innovative training programme for improving the management of patients in this remote area of rural communities. Her programme, which is supported by the Argentinian Society of Dermatology and local health authorities follows a similar model to that devised by Dr Estrada. However it has been carefully modified by Dr Casas to focus on the predominant local diseases and conditions. She is organizing two training sessions (jornadas) in 2010 in different parts of the province. These will consist of a day of interactive teaching with local front line health workers (agentes sanitarios, nurses and medical officers); in addition some primary school teachers will attend. The second day will consist of clinical training where dermatological needs of the area will be assessed, patients treated and hands-on training will be provided to attendees. Dermatologists from other areas in Argentina and elsewhere in Latin America have agreed to participate. Discussions at the end of these sessions will be used to help the organizers to modify and strengthen what promises to be an effective way of improving dermatological care in a region where geography and isolation make attendance at specialist centres impractical.

**ICD11**

**Dermatology and the International Classification of Diseases**

We are, indeed, grateful to the members of the League for their generous contributions towards this exciting project. You will have read Dr. Robert Chalmers’ report in the last issue of the ILDS Newsletter and will have seen that there is still a long way to go. Your financial support is vital in ensuring its completion and would ask, if at all possible, that your Society considers making a donation.
The European Dermatology Forum (EDF) is a pan-European society of heads of academic departments and key opinion leaders in dermatology. It is dedicated to promoting the highest possible standards in the prevention, diagnosis and treatment of skin diseases and thereby improve and extend the lives of patients in Europe with significant skin and sexually transmitted diseases. The EDF aims to achieve this through a number of initiatives which include production of pan-European guidelines setting standards of care and representing the needs of dermatological patients to healthcare providers. A further key initiative is the publication of a White Book delineating the critical issues facing patients with skin diseases in Europe.

Building upon the success of the past two editions, the EDF has published an expanded and definitive text on dermatological issues and solutions that will aid in development and implementation of dermatology care programs across Europe. This book describes the burden of skin and sexually transmitted diseases to Europe and shows how service provision varies across the continent. It outlines the high impact diseases and their management and provides up-to-date information on key areas of clinical and scientific advance. A directory of national dermatological associations, European dermatology societies and patient organisations complete a valuable resource that will inform all those involved in delivery of healthcare to patients. These extend from dermatologists, to healthcare providers to the pharmaceutical industry and to politicians.

The White Book is titled: The Challenge of Skin Diseases in Europe. It was launched at the EDF annual scientific meeting in Luzern, Switzerland on Saturday, January 23rd 2010.

Professor Chris Griffiths, Chair of Dermatology at University of Manchester and President of EDF states: ‘In an era of ageing skin and an ever increasing incidence of skin cancer, the EDF provides leadership to highlight the critical issues in providing cost-effective care for patients with devastating skin diseases. This is encapsulated in the EDF White Book which will provide a key point of reference for all health care decision makers.’

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**Election of New Board Members**

Over the next few months your Society will be receiving information regarding the Election of Board Members to the ILDS Board 2011–2015. Below is a chart showing relevant dates. We will be writing to you to advise which vacancies will exist in the Board for that term.

**Press Release**

Skin and sexually transmitted diseases pose a huge health problem to Europe. These include cancers, infectious diseases and inflammatory processes. Many skin diseases are very common, can be quite severe, and are often chronic, thus placing a burden on health care budgets. Early diagnosis and expert management can lower these costs, reduce morbidity and greatly improve the quality of life for patients. It is the responsibility of dermatologists to provide leadership in the management, prevention, teaching and research of skin diseases and their treatment.

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