

Report dermatologists 2015

Concerning the aims of the Foundation 2015 turned out to be a prosperous year. It was possible to give training, to initiate and support research, and where necessary and possible to supply aid. Below the report of the dermatologists concerned.

Sadly, Dr. Van Diggelen was no longer able to go to Moshi. However, he fulfilled various tasks, among others, acquiring a dermatome for skin transplantations for the RDTC.

Dr. Han Go, a recently retired dermatologist visited the CME in Moshi in January. He stayed there for three months to see whether he could take over the duties of Dr. Van Diggelen. He supervised the clinic and the out-patient department together with Dr. B. Naafs to gain African experience in addition to his extensive clinical experience as a dermatologist in the Netherlands. At the end of the year he spent an additional period of six weeks in Moshi to guarantee the clinical supervision of residents in dermatology and the ADDV dermatologists (community dermatologists). His presence was highly appreciated by the students. He clearly filled in a gap. Prof. W. Faber also visited de RDTC during his presence in Moshi. He paved the way for immunofluorescence microscopy whereby Global Dermatology was also involved.

Dr. Naafs wrote two chapters (Leishmaniasis and mycobacterial infections) together with Dr. Van Hees for a European book on Infectious Diseases of the Skin prior to departing with Dr. Go to Moshi to participate in the CME and to teach. Dr. Naafs gave a lecture on the Epidemiology of leprosy. An Ethiopian from Mekelle (Dr. Tewfik Kassa) and a Brazilian from Sao Paulo (Dr. Wagner Galvao) were sponsored for the CME. Dr. Naafs also spent three months in Moshi where he lectured and supervised clinical activities particularly those of residents in dermatology.

Dr. Naafs left for India after his trip to Tanzania and a brief period home. He was invited to attend the National Indian Leprosy Congress in Hyderabad where he chaired various sessions and gave a talk on new insights in the nerve damage in leprosy. During that week, he also visited a local leprosy- and HIV clinic and had discussions on immunological and genetic research and investigation of the nerves using Echo-Doppler.

During the same period, Dr. Bwanali, a dermatologist from Malawi, trained in Moshi, visited Mekelle to enhance contacts between the practicing East-African dermatologists. He was sponsored by Global Dermatology. Dr Naafs participated in the World Dermatology Congress in Vancouver in June. He had no presentation there for the first time in many years, but instead devoted his time to networking and consulting with many colleagues and friends. He was successful in arranging an extra training for an Ethiopian (Dr. Workalemahu) in the following year in the USA.

He went to Moshi once again in July as an "external examiner" for examinations, particularly of the Master thesis of the third year residents and the clinical examinations of the final year residents. He also examined the ADDV dermatologists. He did this among others, with Prof. Gail Todd from South-Africa. He supervised the residents together with Prof. Todd before and after examinations. He remained for almost five weeks.

At the end of August, he left for Ethiopia for a month, first to Mekelle where he partly worked with Dr. Anders Grangsjö from Sweden and Dr. Normann Iverson from Denmark. During his stay in Mekelle, he participated in discussions in Gondar on increasing the dermatology training in Ethiopia. The dermatologists in Mekelle are also considering to start dermatology training. Prof. Masenga in Mosh will be contacted for this purpose. In relation to the treatment of patients, he evaluated the use of Pentamidine, partially bought via Global Dermatology with funds from the Rotary Amsterdam-South. On the return trip, he visited ALERT in Addis Ababa for a week, now not only a leprosy centre, but also a dermatology-, TB-, orthopedic- and rehabilitation centre. He gave lectures on HIV and leprosy reactions to residents in dermatology. He also participated in private clinics both in Mekelle and in Addis Ababa during his stay. These clinics are in the evening and are an addition to the service

provided by the government and offer the dermatologists the possibility for obtaining the needed extra funds among others, for paying school fees for their children at good schools. This would prevent their departure to the West.

Late in October, he left for a week to Copenhagen to participate in the European Dermatology Congress. Global Dermatology sponsored the participation of Dr. Juliah Muchunu, a dermatologist trained in Moshi in Tanzania. A dermatologist, Dr. Emmanuel Manimba from Rwanda was also sponsored, but his travel visa was cancelled by Denmark a day before his travel because the government was afraid that he would remain in the West. Global Dermatology lost € 405. The foundation expressed its displeasure to the government in Denmark, but received no response. There was a lot of networking during the congress, which resulted in sponsoring of projects by Denmark. A European Society for Tropical Dermatology was definitely established in Denmark to enable the European dermatologists to keep up-to-date with the developments in tropical- and poverty-dermatology. It was agreed that there will be presentations on the skin diseases in refugees during the EADV both in Athens and in Vienna in 2016.

In November, a visit for a month to Brazil followed. First to Rio de Janeiro where a coming Dutch dermatologist followed training under Dr. José Augusto Nery. This training period in 2016 was arranged by Dr. Naafs. He held a presentation on Aids and on the treatment of leprosy reactions. Subsequently, he visited Dr. Maria Angela in Sao Paulo where he lectured on the diagnosis of leprosy and leprosy recurrences after therapy. He conducted several clinical rounds and participated in the Brazilian leprosy congress. As previously, he visited Bauru, the ILSL. He gave presentations on genetics of leprosy and new insights on nerve damage. He evaluated the progress of a research project on neuro-surgery and discussed his newest protionic results with Dr. Cleverson, which may provide an explanation for the working of thalidomide in leprosy reactions.

A couple of months earlier, Dr. Cleverson had supervised Dr. Workalemahu Belachew in the dermatopathology of leprosy, leishmaniasis and deep mycoses. Dr. Workalemahu was sponsored by Global Dermatology.

Dr. Naafs was co-organiser of and participation in the congress on Blood and Skin in the context of poverty-dermatology and refugees organized by Prof. Aldo Marrone in Axum, Ethiopia. In addition, he conducted a clinical round and gave two presentations on HIV and on leprosy. Prof. Masenga was also present and proceeded to Mekelle to advice on the training of dermatologists.

Besides his visits to developing countries, Dr. Naafs was involved in tele-dermatology for physicians in developing countries, around 2-5 consultations per week and also corrected publications of his "pupils".

A positive development is the fact that Global Dermatology, i.e. Dr. Naafs was able to put in motion that a Kenyan in Moshi trained dermatologist (Dr. Samson Kiprono) shall obtain a doctorate under supervision of Prof. Maarten Vermeer in Leiden. Possibly, Dr. Kiprono shall thereafter be appointed professor at the Moi University in Eldoret, Kenya.

Special activities: also this year a blog, the Leprosy Mailing List, was edited and written if required, together with Dr. Pieter Schreuder and Dr. Salvatore Noto.

Publications in 2015

1. B. Naafs, S Noto, PAM Schreuder.
Morbidity and Mortality in Leprosy.
In: IAL Textbook of Leprosy (eds. Bushan Kumar and Hemanta Kumar Kar), 2nd edition
Jaypee, The Health Science Publisher New Delhi Chapter 41, 2015;583-586
2. F. Dassoni, Workalemahu Alemu, B. Naafs, A. Morrone.
Ethiopian cutaneous and mucocutaneous leishmaniasis. Color Atlas.
Blood and Skin 2015 Addis Ababa-Aksum.
3. Maria Angela Bianconcini Trindade, Lana Luiza da Cruz Silva, Lucia Maria Almeida Braz, Valdir Sabbaga Amato, Bernard Naafs, Mirian Nacagami Sotto.

Post-kala-azar dermal leishmaniasis and leprosy: case report and literature review.
BMC Infect Dis. 2015; 15: 543. Published online 2015 November 23. doi: 10.1186/s12879-015-1260-x PMCID: PMC4656188.