

Dermatologist Report 2019

The year 2019 was expected to be the last year for the Foundation Global Dermatology to function. However, it showed to be possible to continue, albeit due to lack of funds at a lower level. Nevertheless it was again possible to achieve the objectives of the foundation.

The activities started with the CME in Moshi, Tanzania. Dr Naafs first assisted the Residents and the ADDV ¢ who would present a presentation. He was moderator in one of the CME sessions and presented a talk on **History of leprosy treatment and U-MDT**. Together with Prof. Gail Todd he assisted Prof. John Masenga, supervised the wards as well the outpatient clinics. He taught the medical students particularly during bedside teaching. He also gave a number of lectures. He stayed for two and a half months. Dr Naafs also assisted during the examinations of residents, ADDV ¢ and medical students. It was a problem that the intake of new residents had to be discontinued because the residents program is run within the Tumaini University that did not have the pré-bachelor education of the residents in order and employed too few specialists. Also, it was made clear that without renewed permission of the Ministry of Health and without a work permit one was not allowed to teach. For this year immigration was willing to allow prof Todd (ten years volunteer) and dr Naafs (more than twenty years volunteer) to continue their work.

After his return to Europe being a board member he attended the board meeting of the Community Health Journal in London.

From 8 to 14 June he attended the World Dermatology Congress in Milano where he was co-chairman in one session and gave three talks in different sessions: **Leprosy now and in the coming years, seen by a clinician; Leprosy-chemoprophylaxis and early diagnosis: state of the art** and **Imported skin diseases in migrants**.

From 29th Juni-4th July he went to China to teach at a course for participants from developing countries organized by the Chinese leprologists. He lectured on: **New findings, explaining early and continuous nerve damage in leprosy**. It was obvious that the level of knowledge of genetics of leprosy in China was high as was the knowledge of epidemiology. But the clinical knowledge of leprosy did need a brush up.

From the 8th to 14th July he attended the Wold Leprosy Congress in Manila where he was involved in the selection of the clinical presentations. During the congress itself he did not give any presentations. He had not expected to be financially capable to attend. However, the Netherlands Leprosy Relief Association paid the ticket. He actively participated in the discussions. The International Leprosy Association meeting extended his place on the board. It was obvious that the Congress was biased to lauding the achievements of the sponsoring organizations, forgetting that the so-called achievements were basically only on paper. A greater percentage of the newly diagnosed patients are already handicapped compared to the newly diagnosed patients diagnosed in the past (twenty years ago), confirming late diagnosis. Also, at present a larger number of patients becomes further disabled during treatment compared to those treated in the past (thirty years ago). Luckily, the organization of the next world congress goes to India, where those sponsoring organizations may have less influence. Dr Naafs is asked to provide support in organizing.

The 3rd of October dr Naafs flew to Sao Paulo where he met prof Maria Angela and Dr. Wagner Galvao. They discussed research. During the weekend he went to Bauru to meet prof Marcus Virmond, the previous president of the International Leprosy Association. They talked about the problems within the leprosy services. He lectured to the scientists of the research centre (ILSL) on: **Early diagnosis and leprosy-chemoprophylaxis: state of the art**. To the residents on: **Differences between the black and the white skin** and on **HIV and SKIN**. To the neurologists he gave a lecture on the neural involvement of *M. leprae* in the skin. From the 15th to the 17th he attended the Brazilian National Leprosy Congress in Recife and gave a paper on: **The subtlety of the innervation of the integumentary system and the consequences of invasion of *M. leprae***. It was a relief for him that the participants faced the real problems in leprosy control and research like the organizers of the next World Leprosy Congress in India did. After the congress he went again to Sao Paulo and lectured at the ABC University on: **Nerve damage and reactions in leprosy**. At the Universidade Federal de São Paulo he gave the same lecture. As always he attended to patients at Casa de Clinicas from the Universidade de São Paulo and taught the residents. He lectured to staff, residents and students on: **Diagnosis of leprosy**. The 25th he went to Londriña and lectured to the local dermatologists and residents on: **HIV and SKIN**. The 28th he flew home again.

From 3rd November to the 29th he was in Ethiopia, where he first attended the Italian congress on poverty dermatology: Skin on the move. He gave a paper on: **Imported skin diseases in migrants**, he chaired several sessions and discussions. After the congress he went to the Ayder hospital in Mekelle to assist with the teaching of the residents on the job. He lectured on: Leprosy, Bullous diseases, Difference between skin diseases in different racial skins and HIV. He checked the leishmaniasis Pentamidine research.

The 9th December he gave a talk to the Rotary NOP in Emmeloord to explain his work. During the year he had a number of activities, by teledermatology he assisted dr Paul Mertens with a survey in Pokot area in Kenya. He wrote a number of contributions for the Leprosy Mailing List of which he is one of the editors. He assisted with editing papers of students and some dermatologists and was peer reviewer of about twenty articles. On a regular basis he was consulted on teledermatology, this year more than 200 times. Together with two colleagues he spent time editing a book on dermatology of migrants.

Publications:

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Position statement: LEPROSY: Diagnosis, treatment and follow-up.

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Comments to the letter to the editor of Dr Sweta Subhadarshani.

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