British Association of Dermatologists 93rd Annual Meeting

ACC Liverpool 9th – 11th July 2013



MERPOOL 2013

LEO Pharma sponsored satellite symposium:

Picato[®], Actinic Keratosis (AK)* and the Patient



*Picato® is licensed for the cutaneous treatment of non-hyperkeratotic, non-hypertrophic actinic keratosis in adults.

The 93rd Annual Meeting of the British Association of Dermatologists, **ACC Liverpool**

18:15 - 19:00, Wednesday 10th July 2013, Hall 3B

Come and join this evening meeting to discuss current challenges surrounding the management of actinic keratosis and how Picato®, a new treatment for actinic keratosis*, may help to improve the management of your patients.

This interactive symposium will be chaired by Dr John Lear, Consultant Dermatologist, Manchester Royal Infirmary and Hope Hospital, Salford, and will review current treatments and clinical data for Picato®. The patient experience will also feature.

Time	Session	Speaker
18:15	Current therapies for AK patients in the UK	Dr John Lear, Consultant Dermatologist, Manchester Royal Infirmary and Hope Hospital, Salford
18:25	Picato® within AK* treatment	Dr Sandeep Cliff, Consultant Dermatologist and Dermatological Surgeon, East Surrey Hospital, Surrey and Sussex Healthcare NHS Trust
18:40	The Picato® patient experience	Dr Tony Downs, Consultant Dermatologist, Royal Devon and Exeter NHS Foundation Trust
18:55	Question and answer session	Dr John Lear

d Prescribing Information for Picato $^{\circ} igtriangleq$ 150 micrograms/gram (mcg/g)

d Prescribing Information for Picato y 130 mm.
icrograms/gram (mcg/g) gel
on: Picato '150 micrograms/gram (mcg/g) gel: each gram of gel contains
genol mebutate; each tube contains 70 mcg ingenol mebutate in 0.47 g of
500 mcg/g: each gram of gel contains 500 mcg ingenol mebutate; each
sins 235 mcg ingenol mebutate in 0.47 g of gel.
: Cutaneous treatment of non-hyperkeratotic, non-hypertrophic actinic

Notations cualled the earliest of noi-rhyperhealtotic, inchrippen cachine keratosis in adults.

Dosage and administration: Application to the face and scalp (150 mcg/g): One tube to be applied once daily to affected area for 3 consecutive days. Application to the trunk and extremities (500 mcg/g): One tube to be applied once daily to affected area for 2 consecutive days. Paediatrics: No relevant use. Elderly: No dose adjustment required. The contents of one tube covers a treatment area of 25 cm² (eg 5 cm x 5 cm); this should be applied to one treatment area of 25 cm². Tube for single use only; discard after use. Squeeze the gel from the tube onto a fingertip and spread evenly over entire treatment area, allowing to dry for 15 minutes. Treatment of neck; if more than half of the treatment area is located in the lower part of the neck, posology for face and scalp should be used. If more than half of the treatment area is located in the lower part of the neck, posology for trunk and extremities should be used. Wash hands with soap and water immediately after applying gel. If treating hands, patients should only wash fingertip used to apply the gel. Avoid washing and touching treated area for 6 hours after applying gel. After this period, treatment area may be washed using mild soap and water. Gel should not be applied immediately after taking a shower or less than 2 hours

of LSRs. Ingenol mebutate did not demonstrate any potential for photo irritation o

photo allergic effects during studies to assess the effect of UV irradiation. However, dito nature of disease, excessive exposure to sunlight (including sunlamps and tanning beds) should be avoided or minimised. Clinically atypical lesions or suspicious lesions for malignancy should be biopsied to determine appropriate treatment.

Drug interactions: Interactions with systemically absorbed medicinal products

Picato* 500 mcg/g gel - EU/1/12/796/002. LEO Pharma A/S, Ballerup, Denmark. **Basic NHS Price:** Picato* 150 mcg/g gel, 3 x 0.47 g, £65.00; Picato* 500 mcg/g gel, 2 x 0.47 g, £65.00 Last revised: November 2012. ® Registered Trademark

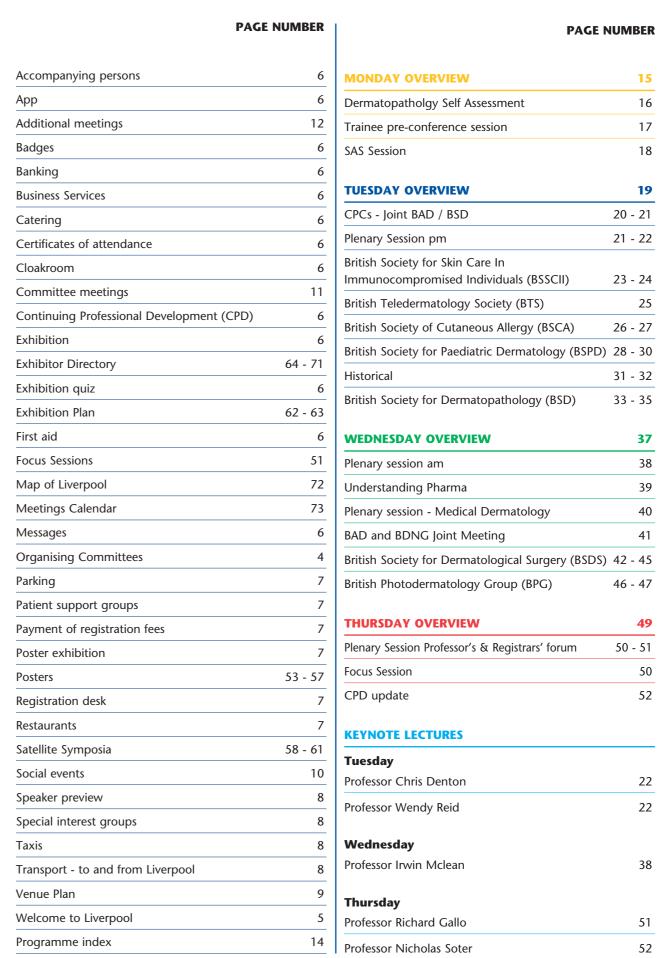
Adverse events should be reported. Reporting forms and information can be found at: www.mhra.gov.uk/yellowcard. Adverse events should also be reported to Drug Safety at LEO Pharma by calling 01844 347333.

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Further information can be found in the Summary of Product Characteristics or from: LEO Pharma, Longwick Road, Princes Risborough, Buckinghamshire, HP27 9RR, UK











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CONFERENCE & EVENT SERVICES

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Mrs Jenna Bowler – Senior Events Coordinator
Mrs Marie Elwér – Finance and Conference Officer
Miss Sally-Ann Koomson – Marketing & Events Coordinator
Miss Danielle Bailey – Events Coordinator

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Dr John Lear

Dr David Paige

Dr Bill Phillips

Prof Charlotte Proby

Dr Helen Ramsay

BTS ABSTRACT SELECTION COMMITTEE

Dr Carolyn Charman

Dr Saul Halpern

Dr Colin Morton

HISTORICAL ABSTRACT SELECTION

Dr Peter Copeman

Dr David Eedy

Dr Julia Ellis

Dr Frances Humphreys

Dr Nick Levell

Dr Sid Orpin

Dr Rakesh Patalay

Dr Paul Yesudian

ACKNOWLEDGEMENTS

The British Association of Dermatologists gratefully acknowledges the contribution of the many exhibitors & sponsors whose attendance has helped make the meeting possible.

A WARM WELCOME TO LIVERPOOL 2013

Welcome to Liverpool for the 93rd Annual meeting of the British Association of Dermatologists. Thank you for registering, we hope you have an enjoyable meeting. Once again we are in the award winning Liverpool Arena and Convention Centre, located in the world-famous Liverpool waterfront. Liverpool is a diverse and exciting city with a huge range of attractions, hotels and restaurants in close proximity to the conference centre. Situated in the heart of the city on the historic, world-heritage waterfront, the Liverpool Arena and Convention Centre is a state-of-the-art conference venue offering all the space, facilities and professional service to satisfy the needs of our delegates and exhibitors, making it the ideal location to stage a successful Annual Meeting.



Scientific Programme

The annual meeting committee has again worked hard to provide a blend of new scientific presentations with updates from experts in various fields.

We are pleased to announce that the Arthur Rook Oration will be delivered by Professor Richard Gallo from San Diego,USA. Professor Chris Denton from London will give the first of the guest lectures at the plenary session on Tuesday speaking on Scleroderma. He will be followed later that afternoon by Professor Wendy Reid, Medical Director of HEE, who will talk about 'Health Education England - the new structure for education and training in the NHS'. Wednesday's programme features Professor Irwin McLean who will update the BAD membership on inhertited skin barrier defects in atopic eczema. The final guest lecture will come from Professor Nicolas Soter, Professor at New York University School of Medicine, who will talk during the CPD session on Thursday afternoon on 'A Current Therapeutic Armamentarium for Chronic Idiopathic and Autoimmune Urticaria/Angioedema'.

For those who did not attend the International Investigative Dermatology meeting in Edinburgh we have asked the authors of the two top scoring abstracts from UK training dermatologists to present their data at the Professors and registrars forum.

On Monday 8th July we will be holding pre-conference sessions for trainees, Specialty & Associate Specialist doctors, medical students and there will be a BSD self assessment session.

We will have a new session on Wednesday morning titled 'Understanding Pharma'. All the Satellite Symposia will take place on Wednesday, with the focus sessions on Thursday lunchtime, featuring topics on Genital Dermatology, Dermoscopy and Clinical Services Issues.

Medical Dermatology features strongly in the programme with a dedicated session on Wednesday afternoon. Professors Brian Kirby, Lesley Rhodes and Frank Nestle will be presenting at the Professors and Registrars plenary forum on Thursday morning, with the popular CPD session taking place in the Thursday afternoon slot.

Social Programme

The Welcome Reception will be held at the ACC Liverpool venue, offering a chance for all attendees and exhibitors to meet on the opening evening of the Annual Meeting. The reception will be situated in the Galleria beginning after the final session finishes at 18:00 and will leave time for attendees to dine afterwards

The Annual Dinner will be held in St George's Hall in the centre of the city. St Georges Hall is widely regarded as one of the finest neo-classical buildings in the world and will provide a magnificent venue for the event.

We hope you have a great meeting, please do not forget the on-line evaluation survey, your views and feedback are crucial to planning of future meetings. Thank you to all our speakers, exhibitors and delegates for all adding to the anticipated success of the meeting.

Malcolm Rustin
Academic Vice President (2011-2013)

WELCOME



ACCOMPANYING PERSONS

We regret that neither accompanying persons nor children/ babies are permitted entrance to the exhibition areas, sessions or social events.

APP

We are pleased to announce that we will be providing a smartphone conference app for delegates to use during the conference.

The app will provide the following features;

- Real time polling during sessions
- Ask the speaker a question
- Take notes on sessions
- Take Hotes off session
- Provide session feedback
- Full agenda details
- Speaker profiles
- Social Media
- Sponsor and exhibitor listings

Now is a great time to get the conference app on your mobile device. To access the app simply open your Smartphone browser and enter the following

URL: www.bad2013app.org or scan this QR Code





BAD 2013 is grateful to Janssen for the sponsoring this app

BADGES

INFORMA

Conference badges will be handed to delegates on registration. For security purposes name badges must be worn at all times throughout the meeting. In the event that you lose your badge, a replacement must be obtained at the registration desk immediately.

BANKING

A Barclays cash machine is situated on site, on the riverside of the building. Walk down the steps before the exit and the machine is on the left; there is no charge for using it.

BUSINESS SERVICES

The E.On Business Centre offers various services, including photocopying, faxing, workstation hire, courier services and sale of stationery and various Liverpool souvenirs.

CATERING

Lunch and all scheduled refreshment breaks will be served from designated points in the exhibition area, Hall 2 of the ACC. If the nearest catering point is not open, staff will direct you to the next most convenient point.

CERTIFICATES OF ATTENDANCE

Certificates of attendance will be in your registration envelope.

CLOAKROOM

There is a cloakroom located on either side of the Galleria. There is a charge of £1 per item. Guests will also be able to store luggage on the day of departure.

COMMITTEE MEETINGS

A programme of the scheduled committee meetings can be found on page 11.

DEVELOPMENT CREDITS (CPD)

This event will be approved for External credit for the CPD Scheme of the Federation of Royal Colleges of Physicians of the UK. Physicians should record their credits in their diaries, in accordance with the current RCP recommendations. Participants should only record the number of hours they attended. The main meeting has been approved for 18 credits and the CPD code is 80200.

EXHIBITION

The exhibition will be located in Hall 2 of the ACC and will be open at the following times:

Tuesday 9th July 10:00 – 17:30 Wednesday 10th July 08:30 – 17:30 Thursday 11th July 08:30 – 15:30

EXHIBITION QUIZ

Exhibition quiz forms will be included in delegate bags. To participate in the quiz, delegates must visit each participating exhibitor and answer a simple question. Participants must also obtain 4 answers from the patient support groups, please note you only need 4 from any of the Patient Support Groups present over the duration of the meeting. All completed quiz forms must be returned to the registration desk by 14:00 on Thursday 11th July. The prizes will be announced after the meeting.

EXHIBITORS

Please see page 62 for a full list of exhibitors and an exhibition plan.

FIRST AID

The stewards at the venue will be able to assist you.

FOCUS SESSIONS

All 13:15 – 14:00 Free of charge, but do not include a sandwich bag.

Thursday 11th July

- Genital Dermatology
- Dermoscopy
- Clinical Services Issues

MESSAGES

A delegate notice board will be situated adjacent to the registration desk, where all delegates' messages will be displayed.

PARKING

The nearest car park to ACC Liverpool is the 1,600 multistorey car park which is on site.

The 1600 space multi-storey Liverpool Waterfront Car Park is fully secure and open 24 hours a day, 7 days a week. It is centrally located on Kings Dock at the site of the ACC Liverpool.

PATIENT SUPPORT GROUPS

The following patient support groups will be represented at the meeting and will have stands in the Hall 2:

Tuesday 9th July & Wednesday 10th July

Caring Matters Now
Ehlers Danlos UK
Golin Syndrome Group
Skin Camouflage Network
Xeroderma Pigmentosum Support Group

Wednesday 10th July

Psoriasis & Psoriatic Arthritis Alliance

Wednesday 10th July & Thursday 11th July

Behcts Syndrome Society Latex Allergy Support Group

Tuesday 9th July, Wednesday 10th July, Thursday 11th July

Alopecia UK
British Association of Skin Camouflage
Changing Faces

Ichthyosis Support Group Nodular Prurigo International

The Hyperhidrosis Support Group

The Psoriasis Association
UK Dermatology Clinical Trials Network

Vitiligo Society Worldwide Lichen Sclerosus

Thursday 11th July Skincare Cymru

In addition, the following groups will have stands within the exhibition:

BADBIR

BAD Communications
British Skin Foundation
BAD Journals
Clinical Services Unit
Community Dermatology & IFD
Historical Collection

Historical Collection 2014 World Congress on Cancers of the Skin Special Interest Groups

PAYMENT OF REGISTRATION FEES

We would prefer delegates to pay by cheque (pounds sterling drawn on a UK bank only or by sterling bank draft) made payable to the 'British Association of Dermatologists'. Cheques in other currencies cannot be accepted. Alternatively, delegates may pay by credit card and this is encouraged for overseas delegates. Please note that we only accept MasterCard and Visa. **American Express cannot be accepted.**

POSTER EXHIBITION

The poster exhibition will be located within the exhibition hall. The posters will be numbered and a list is provided on pages 53-57.

There will be an e-poster display area showing all the posters submitted. Posters should not be removed until 14:00 on Thursday 11th July. Please note that the British Association of Dermatologists cannot be held responsible for any loss or damage to a poster presented during the Annual Meeting.

REGISTRATION DESK

The registration desk will be located on the Galleria level and will be staffed by the BAD team during the following hours:

Monday 8th July 09:30 – 18:00 Tuesday 9th - Thursday 11th July 08:00 – 18:00

RESTAURANTS

For further information about local restaurants and bars around Liverpool please visit www.visitliverpool.com

The ACC Liverpool Delegate Card will be made available to every delegate attending the conference and is packed with offers, discounts and privileges across a range of bars, restaurants, hotels and attractions throughout Liverpool.

SATELLITE SYMPOSIA

The following companies will be holding satellite symposia at the meeting:

Wednesday 10th July

08:00 - 08:45	Hall 3A	Almirall
08:00 - 08:45	Hall 3B	Beiersdorf
13:15 – 14:15	Hall 11A & B	Meda
13:15 – 14:15	Hall 3A	AbbVie
13:15 – 14:15	Hall 3B	Janssen
18:15 – 19:00	Hall 3A	Novartis
18:15 – 19:00	Hall 3B	Leo Pharma





INFORMATION





SOCIAL EVENTS

Please see Social Programme (Page 10).

SPEAKER PREVIEW

Speaker preview will be located in Hall 6 & 7 on the upper level at the ACC, please ask at the registration desk for directions. All presenters must take their memory sticks to speaker preview at least two hours prior to their presentation. Data projection (PowerPoint) will be available.

SPECIAL INTEREST GROUPS

The following Special Interest Groups will hold their meetings during the week of the conference. All special interest group meetings will take place in Liverpool. Their full programmes are featured at the back of each days full programme.

Tues 9th July

British Society for Skin Care in Immunocompromised Individuals 09:00 - 11:40 (Page 23 - 24)

British Teledermatology Society 10:00 – 11:50 (page 25)

British Society for Cutaneous Allergy 09:15 - 12:35 (Page 26 - 27)

British Society for Paediatric Dermatology 09:00 - 12:30 (Page 28 - 30)

Historical

11:00 - 12:30 (Page 31 - 32)

British Society for Dermatopathology

15:00 - 18:00 (Page 33 - 35)

Wednesday 10th July

British Society for Dermatological Surgery 14:00 – 17:10 (Page 42 - 45)

British Photodermatology Group 14:30 – 17:45 (Page 46-47)

TAXIS

Black Cabs are often parked outside the ACC. The phone numbers of local taxi firms are: Davy Liver 0151 708 7080, Delta 0151 924 7373 and Village Cabs 0151 427 7909.

TRANSPORT IN AND AROUND Liverpool - TO AND FROM ACC Liverpool

http://www.btconventioncentre.com/coming/ find_us

By Road

For all car journeys it's best to follow the white on brown tourist route signs for the Waterfront. These signs are visible on the major routes into the city. ACC Liverpool is situated on the Kings Dock directly adjacent to the south side of the Albert Dock. Upon arrival, the Kings Dock entrance is clearly sign posted.

From the North

Leave the M6 at junction 26 and follow signs for M58 Liverpool. Follow to end of M58 and then take signs for A59 Liverpool. Continue to follow Liverpool City Centre until picking up signs for the Waterfront. The 1600 space multi-storey Liverpool Waterfront Car Park is signposted 'Waterfront' on the city wide 'available spaces' signage.

From the South

Leave the M6 at junction 21A and take the M62 to Liverpool. At the end of the M62 follow signs for Liverpool City Centre along Edge Lane, picking up and following signs for Waterfront. The 1600 space multi-storey Liverpool Waterfront Car Park is signposted 'Waterfront' on the city wide 'available spaces' signage.

By Air

Liverpool John Lennon Airport is just 8 miles from the city centre, and a 20 minute taxi ride to the ACC, with regular flights to Ireland and Europe. A taxi from the airport to the city centre will take approximately 20 minutes or the express bus service Route 500 will take approximately 25 minutes, dropping you off within a five minute walk of ACC Liverpool.

By Rail

Liverpool is easily accessible by train from many other major towns and cities across the country, and can be reached in a journey time of just over two hours form London. ACC Liverpool is a 20-minute walk from Lime Street or a short taxi ride.

VENUE

ACC Liverpool, Kings Dock, Liverpool Waterfront, L3 4FP

For Sat Nav, please use the postcode L3 4BX

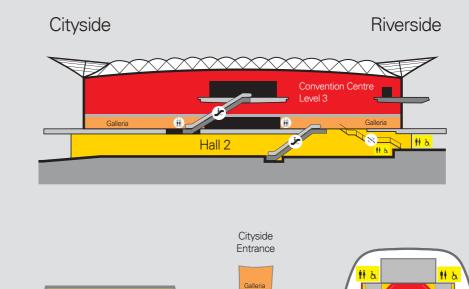
T: +44 (0)151 475 8888 Email: info@accliverpool.com www.accliverpool.com

Wi-fi

There is wi-fi access throughout the ACC.

Please search WiFi hotspots on your device and select free WiFi. You will then be automatically connected











Key

Lift

Escalator

Stairs 244

Male/Female Toilets

Disabled Toilets







PROGRAMM

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SOCIAL EVENTS

WELCOME RECEPTION ACC Liverpool

Tuesday 9th July 18:00 - 20:00

The Welcome Reception will be held at the ACC Liverpool venue. Offering a unique chance for all attendees and exhibitors to meet on the opening evening of the Annual Meeting. Drinks and canapés will be served after the final session finishes at 18:00 and will leave time for attendees to dine afterwards.

The reception will take place on the Galleria, the spine connecting the arena and convention centre.

ANNUAL DINNER St George's Hall Wednesday 10th July, 19:30

The Annual Dinner will be held in St George's Hall in the centre of the city. St Georges Hall is widely regarded as one of the finest neo-classical buildings in the world and will provide a magnificent venue for the event.







COMMITTEE MEETINGS

WED 10TH JULY:

TIME	MEETING	ROOM
11:00 – 13:00	SAS Sub-committee	Hall 5
16:00 – 18:00	British Association of Dermatologists Officers	Hall 5
18:30 – 19:30	National Dermatology Trainee Committee	Hall 4B

TUES 9TH	ULY:	
TIME	MEETING	ROOM
08:00 – 09:00	British Society for Dermatopathology Exec Committee	Hall 14
08:00 - 09:00	British Society for Paediatric Dermatology Training Committee	Hall 13
08:30 - 10:30	British Skin Foundation Grants Advisory	Hall 9
08:45 - 09:15	The British Society for Cutaneous Allergy (BSCA) AGM	Hall 1C
10:30 - 12:30	Dermatology Industry Group	Hall 11C
11:30 – 13:00	British Skin Foundation Trustees	Hall 13
11:40 – 12:10	British Society for Skin Care in Immunocompromised Individuals AGM	Hall 3B
12:00 - 14:00	Community Dermatology Editorial Board	Hall 8
13:00 – 14:30	Senior Skin Group	Hall 3B
13:30 – 14:30	Historical Collection Sub-Committee	Hall 9
14:00 – 15:30	Teachers of Undergraduate Dermatology	Hall 13
14:00 – 15:30	Health Informatics Sub-committee	Hall 5
14:00 – 17:00	British Society for Cutaneous Allergy Committee	Hall 12
14:30 – 15:00	British Society for Dermatopathology AGM	Hall 1C
16:00 – 17:00	Therapy & Guidelines Sub-committee	Hall 13
17:00 - 18:00	British Society for Paediatric Dermatology Committee	Hall 5
17:30 – 18:30	UK DCTN Trial Prioritisation Panel	Hall 9
17:30 - 18:30	BAD Session Judging Committee	Hall 14

MEETING TIME **ROOM** 08:00 - 09:00 Skin Cancer Prevention Sub-committee meeting Hall 8 08:00 - 09:00 BJD Editorial Board Meeting Hall 13 08:30 - 10:30British Society for Medical Dermatology Committee Hall 9 09:00 - 10:30 UKDCTN AGM/Steering Group Hall 14 11:00 - 13:00 British Association of Dermatologists' AGM (Members Only) Hall 1A 12:00 - 13:00 **PUVA Guidelines Meeting** Hall 9 13:00 - 14:00 British Association of Dermatologists Officers Hall 5 13:00 - 14:00 British Cosmetic Dermatology Group AGM Hall 13 13:00 - 14:30 British Photodermatology Group Committee Hall 8 13:15 - 14:15 Dermatology Forum for Wales Phototherapy sub-committee Hall 4B 14:30 - 15:30 British Association of Dermatologists' Executive Committee Hall 4A 14:30 - 18:00 **BAD Session Judging Committee** Hall 14 17:30 - 18:00 **UK Professors Group** Hall 8 17:10 - 17:45 British Society for Dermatological Surgery AGM Hall 1C 17:45 - 18:15 British Photodermatology Group AGM Hall 12

THURS TTI	H JULY:	
TIME	MEETING	ROOM
08:30 - 09:30	Exhibitors' Meeting	Hall 13
09:00 – 12:00	British Society for Dermatological Surgery Committee	Hall 14
10:30 – 12:00	Specialised Dermatology Clinical Reference Group	Hall 13
13:00 – 14:00	BAD Session Judging Committee	Hall 14
13:00 - 14:30	World Congress on cancers of the Skin 2014 Programme Committee	Hall 13
14:30 – 15:30	World Congress on cancers of the Skin 2014 LOC	Hall 13

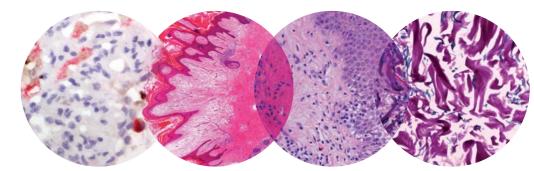


ADDITIONAL MEETINGS

TIME	MEETING	ROOM
13:00 – 14:30	Senior Skin Group	Hall 3A
	For further information please contact maggie@kirkup.plus.com	
16:30 – 17:30	Dermatology Teachers	Hall 3B
16:30	Barriers and bridges: integrating dermatology learning into undergraduate programmes	
	Speakers: Dr Charlotte Reddick, Dr Lily Wheeler and Dr Mini Singh	
16:55	How to make the most of the new BAD smartphone App for medical students.	
	Dr James Coleman and Dr Ingrid Helbling	
17:15	Education update: what's been happening?	
	Dr Stuart Cohen	

THURS 11T	TH JULY:	
TIME	MEETING	ROOM
07:30 – 08:30	Christian Medical Fellowship	Hall 4B
	If you would like to reserve a place at the breakfast please visit the on site registration desk.	





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\(\left\) I know that the cases I send to LDPath will be reported by genuine specialists who hold substantive NHS positions and are at the forefront of their sub-specialty. \(\right\) Dr Raj Mallipeddi, Consultant Dermatologist St Thomas' Hospital



Dr Florence Deroide, MD - Partner

Consultant Dermatopathologist and Head of the Cellular Pathology Department at the Royal Free Hospital. Trained in France (Paris Ouest, Angers), more than 13 years of experience, including 10 in the UK.

Florence co-organises the Anglo-French dermato-pathology meeting in London and is a reviewer for Journal of Plastic, Reconstructive & Aesthetic Surgery.

BAD 93rd Annual Meeting (9th - 11th July) Meet our team on **STAND 41**

Dr Alistair Robson BSc (Hons) - Partner FRCPath DipRCPath

Consultant Dermatopathologist for 12 years at the tertiary referral centre St John's Institute of Dermatology.

Speaker at international conferences in the US, Middle & Far East and member of the Unna Darier Dermatopathology Society.

Numerous research works presented in the last 12 months at top international forums, e.g. American Academy of Dermatopathology, British Society of Dermatopathology, World Lymphoma Congress in Berlin...

Join the 100+ clinicians already benefiting from our first class services



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MONDAY 8TH JULY - OVERVIEW

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Hell 2							Exhibition	Exhibition Build Up 08:00 - 20:00	- 20:00								
Hell 1B				9G	DermSchool				۵	DermSchool			DermSchool	shool			
Hall 1C								Trai	Trainee Pre-conference session	session			Traine	Trainee Pre-conference session	ssion		
Hell 3A						BDNG	Lunch	BDNG		Tea	BDNG						
Hell 3B							Trainee Welcome					Traine e Tea					
Hall 4A								SAS	SAS Meeting				SAS Meeting				
Hell 4B						SAS	SAS Lunch			Te	Tea / Coffee						VDTC Meeti
Hell 5		-			SVS	SAS committee meeting							BAD Off	BAD Officers Meeting			
Hall 6							S	Speaker Preview									
Hall 7							Spea	Speaker Technical Room	u								
Hall 11A & B						G											
Hall 11C						Delinschool practical	placacal										
Hall 12			DS catering					DS Lunch			ă	DS Tea					
										I							
	BAD Sessions	Special Interest Groups	Exhibition / Posters	BAD Committee	Focus Session	BDNG Sessions	Non-BAD Meetings	Satellite Symposia	Delegate Information	uo,							

PROGRAMME



Englanded upon the

MONDAY 8TH JULY – DERMATOPATHOLOGY SELF ASSESSMENT PROGRAMME

TIME	CODE	PROGRAMME	ROOM
12:30 – 18:00		DERMATOPATHOLOGY SELF ASSESSMENT	JURYS INN HOTEL
12:30		Registration at ACC Liverpool (2 minute walk from Jurys Inn Hotel)	
12:45		Lunch	
13:30		Presentation of cases 1 - 20	
15:30		Tea and Coffee and further opportunity to register	
16:00		Presentation of cases 21 - 40	
18:00		End of session	

Approved by Royal College of Pathologists for CPD centre purposes to a maximum of 4 credits

Speakers:	Eduardo Calonje Richard Carr Rino Cerio Martin Cook Paul Craig	
	Sara Edward	
	Lynne Jamieson	
	Wolter Mooi	
	Ed Rytina	
	Maureen Walsh	

MONDAY 8TH JULY – TRAINEE PROGRAMME

TIME	CODE	PROGRAMME	ROOM
12:55 – 18:30	TRAINEE P	PRE-CONFERENCE SESSION	HALL 1C
12:15 – 12:55		Welcome Lunch	Hall 3B
12:55		Introduction Dr Shaheen Haque-Hussain and Dr David de Berker	
13.00	TPC01	Photodermatology Dr Tsui Ling	
13.40	TPC02	Biologics in psoriasis Prof Catherine Smith	
14.20	TPC03	Connective tissue disease Dr Simon Megitt	
15:00	TPC04	Lasers Dr Vishal Madan	
15:40	TPC05	Update on trainee issues Dr Shaheen Haque-Hussain	
15.45		Tea / Coffee	Hall 3B
16.00	TPC06	Ehlers-Danlos syndrome Dr Nigel Burrows	
16.40	TPC07	Psychodermatology Dr Tony Bewley	
17.20	TPC08	How to write a business case? Tania von Hospenthal	
18:00	TPC09	Quiz Dr David de Berker	
18:20	TPC10	Final remarks Dr Shaheen Haque-Hussain and Dr David de Berker	
18:30		Close	
18:45 – 23:00		Trainee & DermSchool evening event	Blue Bar

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TRAINEE PROGRAMME



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TUESDAY

MONDAY 8TH JULY - SAS PROGRAMME

TIME	CODE PROGRAMME	ROOM

12:15 – 17:35 SPECIALITY AND ASSOCIATE SPECIALISTS SESSION	TIALL 4A
TZ:T5 = TZ:55 SPECIALITY AND ASSUCIATE SPECIALISTS SESSION	HALL 4A

1215 1200	Registration and lunch	Hall 4B
12.13 - 13.00	Registration and functi	Hall 40

13.00 Welcome and Introduction	n
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Dr Glenda Hill

CHAIR: Dr Inma Marie-Sole

13.05 SAS01 Occupational dermatitis and the role of patch testing

Dr Mark Wilkinson

13.45 SAS02 Difficult and unusual vilval conditions – how I manage them

Prof Hazel Bell and Mr John Kirwan

14.25 SAS03 Using immunoglobulin therapies in dermatology

Prof Carrock Sewell

15.05 Tea / Coffee Hall 4B

15.35 SASO4 Systemic treatment for severe adult atopic dermatitis

Prof Nick Reynolds

16.15 SASO5 Cutaneous drug reactions – a brief overview and an update on identification

of culprit drugs

Dr Michael Ardern-Jones

16.55 SASO6 Amyloidosis – an overview and guidance for dermatologists on when referral

for further investigation is appropriate

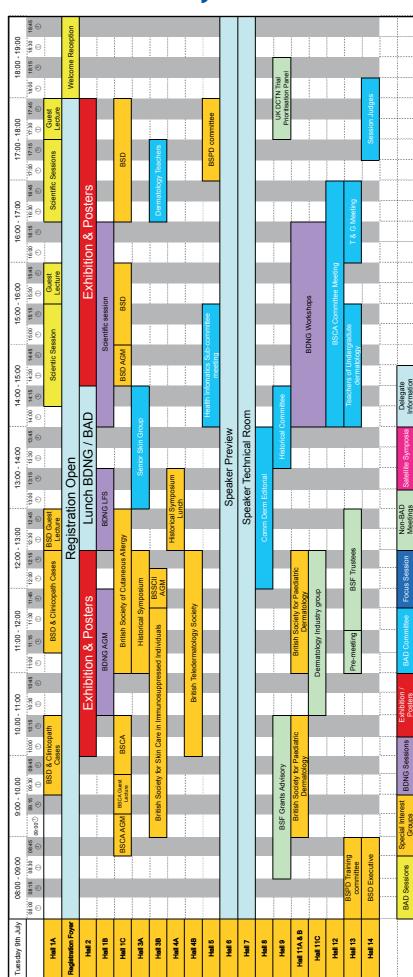
Dr Ashutosh Wechalekar

17.35 Closing remarks

19.30 – 22.00 **SAS evening event**

Gusto Restaurant

TUESDAY 9TH JULY – OVERVIEW



OVERVIEW



Cathy Skin for

TUESDAY 9TH JULY - DETAILED PROGRAMME

TIME	CODE	PROGRAMME	ROOM
08:00 – 18:00		Registration desk open	Galleria
09:15 – 12:35		BRITISH SOCIETY FOR CUTANEOUS ALLERGY (PAGE 26 – 27)	HALL 1C
09:00 – 12:30		BRITISH SOCIETY FOR PAEDIATRIC DERMATOLOGY (PAGE 28 -	30) HALL 11A & E
09:00 – 11:40		BRITISH SOCIETY FOR SKIN CARE IN IMMUNOCOMPROMISED INDIVIDUALS (PAGE 23 – 24)	HALL 3B
10:00 – 11:50		BRITISH TELEDERMATOLOGY SOCIETY (PAGE 25)	HALL 4B
09:30 – 10:26		CLINICOPATHOLOGICAL CASES Joint meeting with the British Society of Dermatopathology	Hall 1A
	CHAIRS:	Dr Eduardo Calonje and Dr Paul Craig	
09:30	CPC-1	Cutaneous cytomegalovirus infection in a patient with gene psoriasis: a case report R. Green, F. Ali, E. McMullen, M. Judge and L. Motta	ralized pustular
09:37	CPC-2	Trichodysplasia spinulosa <u>E. Rashidghamat</u> , E. Calonje, Anissa Moktefi, Laurence Brudy and Agn	ès Carlotti
09:44	CPC-3	Cutaneous Epstein-Barr virus-associated smooth muscle tuminmunosuppressed R.N. Matin, P. Harden, J.C. Bowling and K. Hollowood	ours in the
09:51	CPC-4	Expanding the spectrum of Proteus syndrome: bilateral cerel collagenomas and varicose veins secondary to a mosaic AKT1 J. Wee, P.S. Mortimer, M. Lindhurst, L. Biesecker and C.A. Holden	•
09:58	CPC-5	Disseminated malignancy in a patient with Gorlin syndrome metastatic basal cell carcinoma S. Felton, R. Green, Lynne Jamieson and J.T. Lear	: a rare case of
10:05	CPC-6	An evolving birth mark: bilateral segmental neurofibromator F. Worsnop, S. Mansour and J. Natkunarajah	osis
10:12	CPC-7	A mild form of Herlitz junctional epidermolysis bullosa with necrosis M. Khan, F. Browne, P. Dopping-Hepenstal, L. Ozoemena, J.A. McGra	-
10:19	CPC-8	Generalized eruptive keratoacanthoma of Grzybowski <u>C. Haddadeen</u> , K. Hussein, E. Calonje and S. August	
10:26 – 11:14		Coffee & Exhibition	Hall 2
11:00 – 12:30		HISTORICAL COLLECTION SYMPOSIUM (PAGE 31 – 32)	HALL 3A
11:14 – 12:45		CLINICOPATHOLOGICAL CASES CONTINUED	Hall 1A
	CHAIRS:	Dr Lynne Jamieson and Dr Maureen Walsh	
11:14	CPC-9	A case of acantholytic dermatosis localized to the male geni M-C. Wilmot, C. Perrett, J. Calonje, J. Weir and C. Bunker	talia

1	1:21	CPC-10	Reversal of canities in an elderly white woman <u>A. Ranasinghe</u> , E. Rytina and T.K.K. Ha
1	1:28	CPC-11	Perineural invasion in primary and recurrent cutaneous squamous cell carcinoma presenting as cranial nerve palsies and pain P. Pratsou, W. Szczecinska, J.R. Marsden and I. Ahmed
1	1:35	CPC-12	Paraneoplastic palmar fasciitis and polyarthritis syndrome S. Ong and H. Malhomme
1	1:42	CPC-13	Anti-small ubiquitin-like modifier activating enzyme positive dermatomyositis <u>Z. Laftah</u> , E. Benton, B. Martin and R.W. Groves
1	1:49	CPC-14	Oral bisphosphonate in the treatment of synovitis, acne, pustulosis, hyperostosis and osteitis syndrome F. Worsnop, B. Ho and J. Natkunarajah
1	1:56	CPC-15	AGEP / TEN overlap syndrome: A reaction not to be underestimated F. Worsnop, L. Ostlere and J. Natkunarajah
1	2:15		Joint BAD/BSD Neil Smith Lecture



Lentiginous melanoma: emerging entity or misnomer?Professor Wolter Mooi (Amsterdam, The Netherlands)

The literature on lentiginous melanoma will be critically reviewed, with an emphasis on terminology, diagnostic criteria and follow-up data. Reported data and my personal experience with these lesions appears to be more in line with a slowly evolving melanoma precursor than a full-fledged melanoma

to evaluate the safety of the hedgehog pathway inhibitor vismodegib in

J.T. Lear, M. Gore, T. Guerrero-Urbano, R. Herd, R. Plummer, N. Basset-Seguin,

12:45 – 14:30	Lunch & Exhibition	Hall 2

40.00			
15:00 – 18:00		BRITISH SOCIETY FOR DERMATOPATHOLOGY (PAGE 33 – 35)	HALL 1C
14:15 – 18:00	CHAIRS:	SCIENTIFIC SESSION - SUBMITTED PAPERS Prof Christopher Bunker and Prof Malcolm Rustin	Hall 1A
14:15		Official Opening & Welcome – Prof Christopher Bunker	
14:30		A tour of the new BAD Dermatology Smartphone App for medical Dr Ingrid Helbling and Dr James Coleman	l students
14:45	O-1	Somatic mosaicism for activating mutations in codon 61 of NRAS responsible for multiple congenital melanocytic naevi and neuroc melanosis, and underpins the increased risk of melanoma V. Kinsler, A. Thomas, M. Ishida, N. Bulstrode, P. Stanier, E. Healy, N. Sebire G. Moore	utaneous
15:00	O-2	Clinical characteristics and outcome in multibacillary leprosy patitreated with 12 months World Health Organization multidrug the multibacillary regimen: a retrospective analysis of 730 patients from S. Dogra, S. Kumaran and T. Narang	erapy
15:15	O-3	Interim analysis of STEVIE, a single-arm, open-label, multicentre s	tudy

patients with advanced basal cell carcinoma

J. Hansson, L. Mitchell, M. Starnawski, A. Hauschild1 and K Fife

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The Manual Now State of the Country Skin for

15:30 GL01 Guest Lecture – Introduced by Prof Malcolm Rustin

Hall 1A

Hall 2

Translating scleroderma – pathogenesis to targeted therapy

Professor Christopher Denton (London, UK)

Scleroderma (also termed systemic sclerosis) has the highest mortality of any autoimmune rheumatic disease with more than half of diagnosed patients ultimately dying as a direct result of the disease. However outcomes and survival have improved over the past decade due to systemic investigation, better therapies for organ-based complications. There are now licensed therapies for pulmonary hypertension and digital ulcer disease and an emerging evidence base supporting use of immunosuppression for skin and lung fibrosis. At the same time there is improved understanding of the nature of the pathology, if not its triggering or initiating factors. This lecture will review recent clinical progress in scleroderma, consider how the hallmark pathological processes might be targeted therapeutically. Pathogenesis involves interplay of vascular, immunological and fibrotic pathologies. Growing understanding of the similarities with other autoimmune diseases as well as better definition of the pivotal mediators or cell types that are important in connective tissue repair and fibrosis is providing impetus for more targeted approaches to treatment being developed. In addition, treatments that have been shown to be effective for other medical conditions such as gastro-oesophageal reflex or pulmonary arterial hypertension are being adapted and used in scleroderma. Thus, a pattern of translation of therapies within the clinical arena is emerging that complements the application of growing understanding of the disease biology that may facilitate new treatment targets or modalities. Finally, there are emerging data suggesting that intensive immunosuppression with autologous stem cell rescue might offer a durable treatment effect albeit with substantial treatment-related mortality. Whether more targeted or specific strategies targeting key pathways or mediators could achieve similar benefit with less toxicity will be considered in this presentation. There has been real progress in a "hard" disease and more can be expected if ongoing clinical trials fulfil their potential.

16:00 – 16:30 Tea and Exhibition

O-4 Mathematical modelling of patient flow through secondary care treatments for psoriasis: a novel approach to assist improvement to a complex healthcare system

K. Putman, V. Knight, P. Harper and A.V. Anstey

16:45 O-5 The role of pharmacists in the management of dermatological conditions in the community: a survey of pharmacists in an urban area

C. Reid and T. Markham

17:00 O-6 What should general practice trainees learn about childhood atopic eczema?

A modified Delphi study exploring the views of healthcare professionals and parents of children with atopic eczema

D. Munidasa, T. McPherson and S.M. Burge

17:15 O-7 'Choose and Book' teledermatology, a service overview

P. Bogucki and C. Charman

17:30 GL02 Guest Lecture – Introduced by Prof Christopher Bunker Hall 1A



16:30

 $\label{eq:health_equation} \textbf{Health_Education_England-the new structure for education and training in the NHS}$

Professor Wendy Reid (London, UK)

18:00 Meeting close

18:00 - 19:30 Welcome Reception Galleria

TUESDAY 9TH JULY – BRITISH SOCIETY FOR SKIN CARE IN IMMUNOCOMPROMISED INDIVIDUALS

TIME	CODE	PROGRAMME ROOM
09:00 - 11:40		INDIVIDUALS HALL 3B
	CHAIRS:	Dr Catherine Harwood and Dr Bill Phillips
09:00		Welcome & Introduction by Prof Charlotte Proby
09:05	BIO5	Developing a standardised actinic keratosis assessment protocol R.N. Matin, P. Gaunt, D.L. McCartney, F. Ismail, S.J. Bowden, J.M. McGregor, J. Lear, C.M. Proby and C.A. Harwood
09.15	BI02	Response rates of different clinical subtypes of chronic mucocutaneous graft versus host disease to extracorporeal photopheresis S. Aguilar-Duran, F. Dignan, S. Mahil, C. Wlodek, S. Saglam and F. Child
09:25	BIO3	Prospective study of the incidence of skin cancer in prevalent renal transplant patients L. Mackintosh and C. Geddes
09.35	BI04	Prevalence and associated risk factors for actinic keratoses and actinic field change among renal transplant patients S. Wallingford, C. Proby, A. Vail, S. Russell, J. Lear and A. Green
09:45	BIO1	Male genital dermatoses in immunocompromised patients T.N. Shim, D. Hawkins, A. Muneer, S. Minhas, A. Freeman, C. Jameson, N. Francis, M. Dinneen and C.B. Bunker
09:55	BI06	Impact of skin cancers and premalignancies on the quality of life of organ transplant recipients L. Mitchell, A. Gulati, J.M. McGregor, C.M. Proby, C.A. Harwood
10:05		Guest Lecture HIV Dermatology in the era of ARV Prof Christopher Bunker (London, UK)
10:40		Coffee Break and Poster Viewing Hall 2
11.10		Interactive Case Discussion with Expert panel Dr John Lear, Dr Nilesh Morar and Dr Helen Ramsay
11:10	BI09	Fatal ecthyma gangrenosum associated with a psoas abscess in an immunosuppressed patient F. Worsnop and J. Natkunarajah
11:15	BIO8	Ecthyma gangrenosum caused by <i>Sphingomonas paucimobilis</i> secondarily infecting herpes zoster in an immunocompromised patient <u>S.Z. Jaulim</u> , P. Gazzani, C. Kasparis, A. Bedlow and Jonathan Carter
11:20	BIO7	Too much hair, not enough hair and acne after a kidney transplant: it's not always the drugs R. Atkar, A. Rosenthal and C.A. Harwood
11:25	BI10	A rare case of diffuse cutaneous leishmaniasis in an immunocompromised patient on methotrexate K. Ngan, G. Sharpe, T. O'Dempsey and N. Khirwadkar

BI11

11:30

PROGRAMME





11:35	BI15	Chronic herpes simplex infection in immunocompromised individuals, a diagnostic dilemma M. Paul, J. Hague, S. Orpin and H. Al-Rawi
11:40		AGM
12:10		Meeting Close
POSTERS	BI12	The stubborn skin nodules of <i>Mycobacterium chelonae</i> <u>S. Tso</u> , H. Recica, J. Brockley and J. Berth-Jones
	BI13	Pattern of mucocutaneous manifestations in adult patients of leukaemia: cross-sectional prevalence study in 193 adult patients with leukaemia from a tertiary care centre in India S. Dogra, S. Agrawal, P. Malhotra and U. N. Saikia
	BI14	Evaluation of a nurse-led clinic for skin cancer awareness and surveillance of organ transplant recipients L. Mitchell, A. Gulati, J.M. McGregor, C.M. Proby and C.A. Harwood
	BI16	Hairy cell leukaemia presenting as cutaneous interstitial granulomatous dermatitis N. Anjum, L.H. Lee, G. Soosaipillai, D. McCormick and B. Hughes
	BI17	Haematological disorders and cutaneous malignancy: do they go hand in hand? C. Wootton, A. Patel and P. Lawton
	BI18	An unusual black nodule in a renal transplant recipient J. Fleming, S. Howell, A. Robson, E. Calonje, J. Pattison, N. Attard and M. Wain
	BI19	Nonmelanoma skin cancer in HIV positive patients M. Rajpopat, A. Sahota and S. Rajpopat
	BI20	Mycobacterium chelonae infection in an immunosuppressed patient presenting in an isolated upper extremity sporotrichoid distribution: a challenging diagnosis! F. Latheef and M. Shah
	BI21	'A Dermatology Smear Campaign' A. Devine, P. Yesudian and K.S. Chen
	BI22	Patients presenting to Dermatology with an AIDS-defining illness - a report of three cases V. Scott-Lang, M. Darling, S.A. Holme, M. Rahilly and S. Allan
	BI23	Multi-drug resistant Mycobacterium marinum infection in an immunocompromised patient P. Gazzani, S. Z. Jaulim, C. Kasparis, T. Gee and J. Carter
	BI24	TB or not TB? Pre-biologic screening in a low-medium prevalence population <u>S. George</u> , C. DeGiovanni, K. Ibrahim, C. Giles, P. Cadogan, E. Alexander and S.Doffman
	BI25	A case of male breast cancer in a renal transplant recipient J. Kluk and F. Ismail
	BI27	Flexural psoriasis triggered by natalizumab for the treatment of multiple sclerosis: a very rare but reported association F. Latheef and B.P. Walker
	BI28	An unusual complication of systemic therapy in a patient with atopic eczema <u>S. Ogden</u> and E. Stewart
	BI29	Is skin biopsy needed in cases of high clinical suspicion of cutaneous graft-versus-host-disease? V. Rajkomar, N. Aldoori and D.J. Gawkrodger
	BI30	Calciphylaxis in a patient after 16 years of renal transplant

M. Fadhil and S. Shah

TUESDAY 9TH JULY – BRITISH TELEDERMATOLOGY SOCIETY

TIME CODE PROGRAMME ROOM

TIME		CODE	PROGRAMME	ROOM
10:00 -	11:50		BRITISH TELEDERMATOLOGY SOCIETY	HALL 4B
	10:00		Welcome Introduction Dr Saul Halpern	
	10:10		Change in costs and efficiency after a decade of teledermator based on 90,000 teleconsultations Dr Job van der Heijden (Manager Research and Development, KSYOS Centre, Amsterdam) Teledermatology has been successfully implemented in The Nether improved care trajectories and lower associated costs: 2,816 general practitioners and 203 dermatologists performed teledeteleconsultations performed from 2006 to 2012 were included. In the where the general practitioner sent a teleconsultation to prevent a refer referrals was prevented. In the group of patients where the general teleconsultation for a second opinion, 15% were physically referred aft Conventional Care constituted 192,00 per dermatology patient constituted 68,00 per teleconsultation. Average price of patient that for TD: 157,06. The estimated cost reduction was 18%. What were the factors leading to this success and are they generalizable.	Telemedical erlands resulting in ermatology. 79,361 ermatology for patients ral, 73% of physical practitioner sent a ter teleconsultation. TeleDermatology thas been selected
	10:30	BT01	Quality measures in a teledermatology service	
	10.30	DIVI	T. Wing and <u>D.A.R. de Berker</u>	
	10:50	BT02	Teledermatology service in Tayside, Scotland: a snapshot Y.N. Lau and C.J. Fleming	
	11:10	BT03	A new model of teledermoscopy combining service and educ E.V. Wray, B. Brant, F. Hussain and F.M. Muller	ation
	11:30	BT04	Mobile medical technology software applications for dermat their patients <u>T. Lewis</u>	ologists and

11:50

AGM

25

PROGRAMME



TUESDAY 9TH JULY – BRITISH SOCIETY FOR CUTANEOUS ALLERGY

TIME	CODE PROGRAMME	ROOM
08:45 – 09:15	AGM	Hall 1C
09:15 - 12:35	BRITISH SOCIETY FOR CUTANEOUS ALLERGY	HALL 1C

5 – 09:15		AGM	Hall 1C
- 12:35		BRITISH SOCIETY FOR CUTANEOUS ALLERGY	HALL 1C
09:15	CHAIRS:	Prosser - White Oration Allergic Contact Dermatitis to isothiazolinones - the emergin	ng story
09:45	CD01	Prof Jeanne Duus Johansen (Gentofte Hospital, Denmark) Methylchloroisothiazolinone and methylisothiazolinone cont a new epidemic R. Urwin and S.M. Wilkinson	act allergy:
09:55	CD02	Outbreak of contact allergy to cosmetic preservative: history (again) J. Mann, I. White, J. White, P. Banerjee and J. McFadden	repeats itself
10:05	CD03	Occupational disease in beauticians reported to The Health a Research network from 1996 to 2011 C. Kwok, A. Money, M. Carder, S. Turner, R. Agius, D. Orton and S.M.	-
10.15	CD04	Our experience with alitretinoin in the management of patie chronic, severe hand eczema J. Dua, N. Gallacher, K. Warburton and S. Cooper	ents with
10:25	CD05	An ethnographic insight into the psychological impact of ha A. Bewley, N. Mason, J. Rawlins and S. Walker	nd eczema
10:35		Coffee Break	Hall 2
	CHAIRS:	Dr Sarah Wakelin and Dr Mark Wilkinson	
11:05		Guest Lecture Update on Fragrance Allergy Dr Deirdre Buckley (Bath, UK)	
11:25	CD06	Patch testing to the 26 individual labelled fragrances over a J. Mann, J. McFadden, J. White, I. White and P. Banerjee	two-year period
11:35	CD07	Prevalence of allergy to oxidized limonene and linalool in the H. Audrain, C. Kenward, C.R. Lovell, C. Green, A.D. Ormerod, J. Sanso Chowdhury, S.M. Cooper, G. Johnston, S.M. Wilkinson, C.M. King, N. C. Holden, B. Statham, J. Williams, S. Wakelin, J. English and D.A. Buck	om, M.M.U. Stone, H.L. Horne,
11:45	CD08	An outbreak of allergic contact dermatitis to citral in beauti in a health spa P. De Mozzi and G.A. Johnston	cians working
11:55	CD09	A multicentre review of bakery and dental series allergens to cheilitis in the U.K. S. Fatah, H.L. Horne, S.M. Wilkinson, D.J. Gawkrodger, J. English. C.M. Ormerod, M.M.U. Chowdhury, S.M. Cooper, N.M. Stone, C.M. King a	. Green, A.D.



12:05	CD10	Denture stomatitis resulting from tertiary butylhydroquinone- and methylhydroquinone- induced allergic contact mucositis N.Y.Z. Chiang and D.A. Thompson
12:15	CD11	A case of wheat protein isolate allergy manifesting as anaphylaxis and cosmetic allergy A. Lloyd-Lavery, S.M. Cooper, G. Ogg and J. Reed
12:25	CD12	Metal allergy and joint replacement: advice in the absence of guidelines <u>D.J. Gawkrodger</u>
POSTERS	CD13	Allergy at arm's length: occupational contact dermatitis to carbimazole. N. Farquharson and I. Coulson
	CD14	Wound dressings: a potential source of acrylate induced allergic contact dermatitis N.Y.Z. Chiang and D.A. Thompson
	CD15	A case of systemic contact dermatitis due to intra-articular injection of Depo-Medrone (methylprednisolone) Y. Robson, M. Hughes and N. Stone
	CD16	Sensitivity to p-phenylenediamine (PPD): positive relationship of response to PPD on patch testing and cross-reactions with other chemically related allergens B. Thomas, I. White, J. White, J. McFadden and P. Banerjee
	CD17	Audit to assess whether a history of a cosmetic reaction or allergic contact reactions to fragrance mix 1 might be predictive of allergic contact reactions to oxidized linalool 6% and oxidized limonene 3%.

C. Holden, T. AlEnezi, A. Sultan and D.J. Gawkrodger



TUESDAY 9TH JULY – BRITISH SOCIETY FOR PAEDIATRIC DERMATOLOGY

TIME CODE PROGRAMME ROOM

09:00 – 12:30

BRITISH SOCIETY FOR PAEDIATRIC DERMATOLOGY

HALL 11A & B

CHAIRS: Dr Olivia Schofield and Dr Hossain Shahidullah

09:00

PA01

Early-onset eczema and disease severity are the main risk factors for food sensitization at 3 months of age in exclusively breastfed infants

D. Greenblatt, M. Perkin, K. Logan, T. Marrs, S. Radulovic, L.E. Campbell, S.F. MacCallum, W.H.I. McLean, G. Lack and C. Flohr

09:10 PA02 Oral azathioprine for the treatment of childhood eczema: safety profile and guidelines for monitoring

N. Fuggle, W. Bragoli, A. Mahto, S. Syed, N. Roberts, A. Martinez, J.I. Harper, D. Lomas, M. Glover and V. Kinsler

09:20 PA03 Predictors of persistent meticillin-resistant Staphylococcal aureus colonization in paediatric atopic dermatitis

C. Foley, R. Cunney, S. Gleeson, P. Lenane and B. O'Donnell

09:30 PA04 Risk factors for the onset and persistence of childhood eczema: birth cohort study

M. Ridd, C. Penfold, R. Morris, S. Sullivan, M. Santer, A. Roberts, G. Dunnill, P. Magin, L. Paternoster and S. Purdy

09:40 PA05 Interleukin-10 receptor mutation presenting with severe nappy ulceration and infantile inflammatory bowel disease

B.S. McDonald, S. Narayanan, M. Elawad and K. Batta

09:46 PA06 Problematic spitzoid lesions in childhood

S. Mashayekhi, C. Flohr, A. Greig, M. Neat, G. Ferrara, O.E. Dadzie, K.M. Acland, C.M. Stefanato and A. Robson

09:56 **Guest Lecture**

Next generation diagnostics for inherited skin disease

Prof John McGrath (London, UK)

Advances in DNA sequencing methods have changed how we diagnose genodermatoses in 2013. New techniques such as whole exome sequencing now permit screening of all the coding regions of the genome in one go to find pathogenic mutations. Moreover, sequencing platforms are becoming cheaper and quicker and more accessible to dermatologists. This lecture will provide examples of how next generation sequencing is being used to diagnose inherited skin diseases and how current generation clinicians can access and benefit from the new DNA sequencing technologies.

10:30 Coffee and posters Hall 2

CHAIRS: Dr Mary Glover and Dr Susannah Baron

11:00 PA07 Efficacy of topical timolol 0.5% ophthalmic solution to treat infantile haemangioma: a study of 105 haemangiomas from a single centre

D. Khanna and P. Chakravarty

11:10 PA08 An audit of the initiation of oral propranolol to treat infantile haemangioma in 35 patients

N. Farquharson, P. Arkwright and T. Clayton





11:26 PA10 Rituximab in childhood pemphigus: an experience of five patients
A.J. Kanwar and K. Vinay

11:36 PA11 A review of the treatment and demographics of children in the U.K. with vitiling

A. Scott, N. Dinani and N. Roberts

6 PA12 **Localized epidermolytic ichthyosis secondary to a novel keratin 1 mutation occurring in monozygotic twins and treated with acitretin**

J. Wee, A. Terron-Kwiatkowski, D. Baty, E. O'Toole and J. Natkunarajah

11:52 PA13 Are we harming our children on long-term prescribed oral medications from the effects of sugar and other excipients? A case of tooth decay and review of current guidance

E. Burden-Teh, G. Kemsley and J.C. Ravenscroft

12:00 Guest Lecture

The Inherited Photodermatoses in children: a whistlestop tour of pathogenesis, genetics and management

Dr Robert Sarkany (London, UK)



The inherited photodermatoses are a relatively rare but severe and potentially dangerous group of diseases which generally present to Paediatric Dermatologists. They classify into one group of diseases due to hereditary metabolic defects, and another group due to defects in DNA repair. This lecture will focus mostly on the Childhood Porphyrias and on Xeroderma Pigmentosum. The commonest childhood porphyrias are Erythropoietic Protoporphyria, Congenital Erythropoietic Porphyria (Gunter's Disease) and Variegate Porphyria. In addition to the complex issues around photoprotection against visible light and treatment of photosensitivity, the lecture will tackle the lessons from the pathogenesis and genetics, and the management of systemic and internal complications of the childhood porphyrias. Xeroderma pigmentosum is a rare autosomal recessive multisystem disorder which poses unique challenges for clinical management. Early diagnosis and absolute photoprotection against UV currently are the only ways of reducing morbidity and prolonging lifespan, but both pose challenges for Clinicians and patients alike. The lecture will cover these issues as well as potential new treatments and diagnostic methods.

12:30 Close

POSTERS PA14 Two cases of rapidly involuting congenital haemangioma
W. Szczecinska and H. Shahidullah

PA15 **LEOPARD syndrome or Noonan syndrome? A difficult distinction in early childhood**

S. Madhogaria, S. Sharif and C. Moss

PA16 Vascular Ehlers-Danlos syndrome presenting with abnormal recurrent bruising in a 3-year-old girl

J. Newsham, G.J. Sobey and T.H. Clayton

PA17 **A difficult case of atopic eczema: useful learning points**M.S. Shareef, L. Albenali, M.J. Cork and S.M. Clark

Cutaneous xanthomas in homozygous familial hypercholesterolaemia: an important lesson

N.Y.Z. Chiang, C. Agwu, S. Vijay, P. Abdullah and M. Maheshwari







PA20	A tale of two brothers: neonatal lupus in an antibody-negative family A. Khoo and E.P. Burova
PA21	Ichthyosis prematurity syndrome in two siblings N. Farquharson, S. Sivashankar and I.H. Coulson
PA22	Deep infantile haemangioma responding to propranolol after the proliferative stage
	E. Burden-Teh and R. Murphy
PA23	Lichen planopilaris: the paradoxical role of tumour necrosis factor antagonists M. Walsh, <u>P. Jayasekera</u> and R.A.G. Parslew
PA24	Phenotypic and genotypic overlap between acro-dermato-ungual-lacrimal-tooth syndrome and ectrodactyly-ectodermal dysplasia-clefting syndrome: a better classification is needed
	S. Madhogaria, L. Ozoemena, J.A. McGrath and C. Moss
PA25	Aleukaemic congenital leukaemia cutis S. Ayob, J. Payne, M. Al-Adnani and S. Garg
PA26	Aneurysmal fibrous histiocytoma in a 3-year-old child A. Ranasinghe, L. Hook, E. Rytina, I. Grant, C. Fischer and J. Gass
PA27	Dermatitis simulata and the art student H. Bridgestock and H. Recica
PA28	Poikiloderma of Clericuzio A. Kapadia, M.S. Shareef and S.M. Clark
PA29	Buschke-Ollendorff syndrome affecting lower-limb function in two children C. Goodhead, C. Blasdale and A. Taylor
PA30	Beckwith-Wiedemann syndrome with multifocal infantile haemangiomas and hepatic haemangioendotheliomas <u>L. Craven</u> and A. Belgi
PA31	A case of juvenile xanthogranuloma with bilateral retinal detachment <u>C. Kwok</u> , A. Kapadia, W. Merchant and S.M. Clark
PA32	Orofacial granulomatosis predating the onset of multiple autoimmune diseases: an autoimmune association? N.Y.Z. Chiang and A. Abdullah
PA33	Localized congenital giant juvenile xanthogranulomas resolving with atrophic sequelae S. Sanyal, K. Batta and A. Rubin
PA34	Spinal dysraphism and its cutaneous signs M. Paul, A. Loffeld, H. Goodyear and D. Rodrigues
PA35	A case of congenital tufted angioma: a rare vascular tumour

S. Rajan and C. Kennedy

TUESDAY 9TH JULY - HISTORICAL

Guest Lecture

TIME		CODE	PROGRAMME	ROOM
11:00 -	12:30		HISTORICAL SYMPOSIUM	HALL 3A
		CHAIRS:	Dr Nick Levell	
	11:00	H01	Thomas Bateman through the looking glass: a newly discord a sensitive man L. Millard	overed personal archive
	11:15	H02	Dermatology back in the day: a review of inpatient care i <u>V. Scott-Lang</u> , E.T. Ooi and C. Benton	n the 1940s
	11:30	H03	The life and times of the mighty mite K.E. Davies and P.D. Yesudian	
	11:45	H04	The story of Daniel Carrion: a fatal quest for insight into disease E. McNulty-Brown and A.V. Anstey	oroya fever and verrug

King George III's madness; the porphyria myth

Prof Timothy Peters (Birmingham, UK)



12:00

King George III (1738-1820) had, 4 possibly 5 episodes of 'madness', diagnosed as manic-depressive psychosis. In 1965 Ida Macalpine and her son Richard Hunter, rejected this diagnosis and claimed that George had recurrent attacks of acute porphyria. In spite of well-founded criticisms, Macalpine and Hunter were able to gather extensive and lasting support for their claims.

Recent re-evaluation of the King's medical records has shown that Macalpine & Hunter were highly selective in their reporting omitting any evidence that did not support a diagnosis of porphyria, and indicates that the King suffered from recurrent attacks of acute mania, i.e., bipolar disorder.

The reasons for and consequences of Hunter and Macalpine's misleading claim will be discussed.

		The reasons for and consequences of flatter and macaipine
POSTERS	H05	How the rain forests saved our skin! P. Balasubramaniam and R.K. Lister
	H06	H. Radcliffe Crocker: doyen of British dermatology <u>L.L. Griffin</u> and C.E.M. Griffiths
	H07	Joseph Goldberger and the enigma that was pellagr E.D. Owen, Y. Robson and A.V. Anstey
	H08	Why Pthirus pubis don't watch Sex and the City K.S. Chen and P.D. Yesudian
	H09	Hans Reiter: his syndrome and shameful past K. Salako and M. Kalavala

H10 Sir Jonathan Hutchinson: freckles and foibles C. Wootton

The Scottish Women's Hospital and increased survival from gas gangrene in World War I

V. Scott-Lang, G. Kavanagh and D. Fisher

HISTORICAL

9TH

JULY





H12	Arthur Whitfield, 1868–1947: much more than an ointment A. Sharma, W. Malein and S. Orpin
H13	'Wigging out!' A. Devine and P.D. Yesudian
H14	The men behind the lines F. Worsnop, B. Ho and J. Natkunarajah
H15	Historical use of radiation epilation for tinea capitis in childhood: a life sentence? <u>K. Ngan</u> , P. Jayasekera, R.M. Azurdia and J. Verbov
H16	The mystery of the Black Sore (Kara Yara) M. Malik and P.D. Yesudian
H17	Francis Xavier Dercum, 1856–1931: a less than dolorous life M. Crow, A.H.M. Heagerty and S. Orpin
H18	On target: erythema multiforme, a history Z. Venables and N.J. Levell
H19	Gerhard Henrik Armauer Hansen (1841–1912), the man who unveiled the mystery of leprosy M. Paul, Y. Mansouri and A. Loffeld
H20	What's in a name? The historical descriptions of hidradenitis suppurativa R. Coelho and N.J. Levell
H21	New empires and old enemies: the story of tuberculosis and its cutaneous manifestations

S. Laird, P. Gazzani and C. Kasparis

TUESDAY 9TH JULY – BRITISH SOCIETY FOR DERMATOPATHOLOGY

TIME	CODE	PROGRAMME	ROOM
08:00 - 09:00		Executive BSD Committee Meeting	Hall 14
09:30 – 12:15		Clinicopathological Cases, Joint meeting with the British Association of Dermatologists	Hall 1A
12:15 – 12:45		Joint BAD/BSD Neil Smith Lecture Lentiginous melanoma: emerging entity or misnomer? Prof Wolter Mooi (Amsterdam, The Netherlands)	Hall 1A
14.30 – 15.00		BSD AGM	Hall 1C
15:00 – 18:00		BRITISH SOCIETY FOR DERMATOPATHOLOGY	HALL 1C
	CHAIRS:	Dr Eduardo Calonje and Dr Lynn Jamieson	
15:00		Introduction and comment on posters	
15:05	DP01	Merkel cell carcinoma in the U.K.: an urgent need for evidence management M. Sommerlad, C.A. Harwood and R. Cerio	ce-based
15:12	DP02	A 10-year retrospective review of vulval squamous cell carcin with lichen sclerosus S.H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Chattopadhyay, A. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Shiraz, G. Meligonis, P. Baldwin and S. H. Hussain, M. Shiraz, G. Meligonis, P. Baldwin and S. Hussain, M. Shiraz, G. Meligonis, P. Baldwin and S. Hussain, M. Shiraz, G. Meligonis, P. Baldwin and S. Hussain, M. Shiraz, G. Meligonis, P. Baldwin and S. Hussain, M. Shiraz, M. Shi	
15:19	DP03	Is granuloma faciale part of the IgG4-related disease spectrum E. leremia, Agnes Carlotti and E. Calonje	m?
15:26	DP04	p63 and nuclear factor- B expression in primary cutaneous B- further evidence for pathogenetic heterogeneity Z. Shukur, P. Coates, A. Subtil, W. Kempf, D. Sahni and A. Robson	cell lymphoma:
15:33	DP05	Retrospective 20-year review of pathology reporting of eccrisin a U.K. dermatology unit A.S.W. Yong, K.Y.C. Lee, L. Igali, I. Nunney, S.N. Shah and E. Tan	ne porocarcinoma
15:40	DP06	A retrospective study of 13 cases of vulvar melanoma M. Chattopadhyay, E. Rytina, G. Meligonis, P. Baldwin and P. Todd	
15:47	DP07	Cutaneous granulomatous lesions in congenital immunodefic <u>C. Fleming</u> , B. Martin, E. Calonje and C. Smith	iency states
15:54	DP08	Perineural inflammation in scleroderma: systematic character poorly recognized but potentially useful histopathological fee C.A. Dhaliwal, <u>A.I. MacKenzie</u> and A. Biswas	
16:01	DP09	Report of two cases of the so-called 'malignant' dermatofibre behaviour be predicted on morphology? W. Rickaby, E. Ieremia, M. del Carmen Gonzalez Vela, J. Fernando Valand E. Calonje	
16:08		Coffee break	Hall 2



16:30 CHAIRS: Dr Eduardo Calonje and Dr Paul Craig

16:30 Early melanoma. Small melanoma. Naevoid melanoma. How many are melanomas?

Prof Wolter Mooi (Amsterdam, The Netherlands)



Neoplastic transformation and progression to malignancy is a multistep process, but diagnostic tumor pathology strives to categorize individual lesions as either benign or malignant. Only tumors that never behave as cancer are called benign.

The problem of this oversimplification is, that groups of lesions that only rarely behave as cancers, need to be labelled as malignant, for truly benign lesions never do. Benignity guarantees no further trouble, malignancy indicates a chance of further trouble, even when that chance is small.

When a very thin melanocytic lesion is diagnosed as melanoma, everyone expects the patient to do well, and no one challenges the pathologist's diagnosis if the patient does well. However, the situation is entirely different if the pathologist has diagnosed a benign entity, but the lesion subsequently behaves as a cancer. Accordingly, there is a constant pressure on diagnostic pathologists to call a 'difficult' lesion malignant.

Obviously, one cannot diagnose naevus when in doubt about the possibility of a malignant potential of a lesion. In order to avoid overdiagnosing melanoma on the one hand, and taking risks on the other, I believe it is wise to use a category of melanocytic tumours (or proliferations) of uncertain malignant potential (MELTUMPs).

17:15	DP10	Clinicopathological analysis of 54 patients with cicatricial alopecia A. Khalid, K.S. Chen and P.D. Yesudian
17:22	DP11	Cryoglobulinaemia: the tip of the rete ridge K. Muttardi, E. Calonje and B. DeSilva
17:29	DP12	Bullous scabies associated with positive direct immunofluorescence B.S. McDonald, C. Orteu and V. Swale

17:36 DP13 An unusual case of finger ulceration

N. Bansal, A. Imtiaz, S. Taibjee, R. Carr and H. Kutzner

17:43 DP14 Squamous cell carcinoma arising within disseminated superficial actinic porokeratosis

M. Chattopadhyay, E. Rytina and P.M. Todd

17:50 DP15 The forgotten sign: half-half blisters as a presentation of meticillin-resistant Staphylococcus aureus bullous impetigo in a 20-year-old woman returning from the tropics

J. Dua, A. Gafita, E. Davies, C. Rodriguez-Garcia and S. Grabczynska

17:57 Best presentation prize and close

POSTERS DP16 **Lymphoplasmacytic plaque in children': a report of two adult cases** E.T. Ooi, A. Biswas, O. Schofield, V.R. Doherty and C.S. Murray

DP17 To compare bacillary index on slit-skin smear with bacillary index of granuloma in patients with leprosy: its relevance to present therapeutic regimens

M.S. Kumaran, S. Dogra, T. Narang and U.N. Saikia

DP18 A review of melanoma pathology reporting: looking beyond just Breslow thickness

S. Cheung, L. Ahmed and A. Youssef

DP19 Chronic fibrosing vasculitis of the penis

S. Nasir, C. Murray, V. Swale, E. Calonje and S. Mazzon

DP20	A rare variant of fibrosarcomatous dermatofibrosarcoma protuberans P. Fiandeiro, A. D'Souza, E. Calonje and S. Hoque
DP21	Infliximab-induced alopecia: a recently documented antitumour necrosis factor- adverse event and a novel cause of noncicatricial alopecia <u>E. Ieremia</u> , K. Anneke and C. Stefanato
DP22	Mid-dermal elastolysis of the back presenting 6 years post-toxic epidermal necrolysis C. Cunningham, L. Joseph and J. Ferguson
DP23	A rare presentation of cutaneous pseudolymphoma as a preleukaemic state M. Sivaramakrishnan, R. Kerr, A. Evans and A. Affleck
DP24	Lisinopril-induced pemphigus C. Haddadeen, L. Craven, W. Chong and C. Stephens
DP25	Think zinc: acquired acrodermatitis enteropathica in a patient with metastatic adenocarcinoma of unknown primary <u>V. Salter</u> , S. Ekanayake, M. Malik and M. Petkar
DP26	Cutaneous perineural granulomatous inflammation masquerading as leprosy <u>B. Shaheen</u> , P. Woo and A. Barbieri
DP27	A widespread granulomatous eruption heralding the onset of myelodysplastic syndrome A. Fogo, H. Hunter, D. McLornan and S. Walsh

Multiple scrotal verruciform xanthomas in a West African man

D. O'Callaghan, V. Dvorakova, P. Marren and P. Regan

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BSD

PROGRAMME



TOUND ATTO

Kilimanjaro Challenge

London 2 Brighton Challenge

London Marathon



Trans Pennine Challenge

British OK

Moonriders Cycle Ride

Ride London 100

Great North Run

Find out how you can help

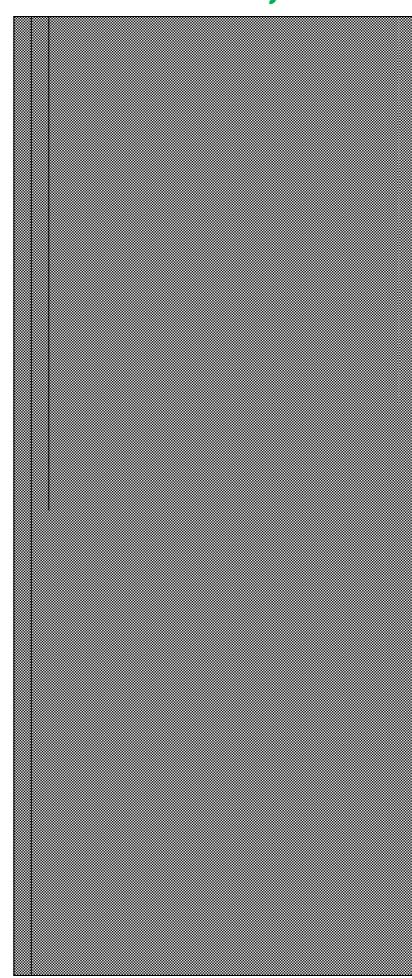
The British Skin Foundation 4 Fitzroy Square, London W1T 5HQ www.britishskinfoundation.org.uk

For general enquiries and to make a donation: 0207 391 6341 admin@britishskinfoundation.org.uk

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press@britishskinfoundation.org.uk

WEDNESDAY 10TH JULY – OVERVIEW



PROGRAMMI

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WEDNESDAY

10TH

DETAILED

PROGRAMME

WEDNESDAY JULY 10TH – DETAILED PROGRAMME

TIME	CODE	PROGRAMME	ROOM
08:00 - 18:00		Registration desk open	Galleria
08:00 - 08:45		ALMIRALL SATELLITE SYMPOSIUM (PAGE 58)	HALL 3A
08:00 - 08:45		BEIERSDORF SATELLITE SYMPOSIUM (PAGE 58)	HALL 3B
08:30 - 09:45		SCIENTIFIC SESSION - SUMITTED PAPERS	
	CHAIRS:	Dr Jan McLelland and Dr David Eedy	
08:30	O-08	Topical glycopyrrolate spray 2% reduces axillary hyperhidrosis extent as Botox injections D. Baker	s to a similar
08:45	O-09	Diagnostic criteria for erosive lichen planus affecting the vulva electronic-Delphi consensus exercise R. Simpson, K. Thomas, P. Leighton and R. Murphy	a: an
09:00	O-10	Use of electrochemotherapy in the management of unresectable melanoma and metastatic skin deposits N. Clayton, A. Sadri, M. Boyce, V. Wolstenholme, C. Harwood, G. Moir, and R. Cerio	
09:15	GL03	Guest Lecture – Introduced by Prof Malcolm Rustin	



Inherited skin barrier defects in atopic eczema

Professor Irwin McLean (Dundee, UK)

Atopic dermatitis ("eczema) is a common complex disease where a combination of strong genetic predisposing factors combine with appropriate environmental stimuli and lead to inflammatory skin disease. Ichthyosis vulgaris (common dry, flaky skin) is arguably the most common Mendelian single gene disorder, where about 1 in 90 of the British population have a severe form and as many as 1 in 7 have mild or sub-clinical form of the disease. In 2006, we identified the first mutations in the filaggrin gene as the cause of ichthyosis vulgaris and showed that the condition is semi-dominant - homozygotes are severely affected; heterozygotes are mildly affected (Nature Genetics 38:337-342 2006). Profilaggrin is the main protein component of keratohyalin granules in the epidermis and its processed product, filaggrin, is involved in biogenesis of and subsequent hydration of the stratum corneum (J Cell Sci, 122:1285-1294). The nonsense or frameshift mutations identified in the filaggrin gene lead to complete loss of profilaggrin/filaggrin protein production in the epidermis. Surprisingly, these mutations are very common in the population and are carried by 5-14% of people of white European ancestry. Since many individuals with ichthyosis vulgaris also have eczema and associated allergies, and the filaggrin gene is located within a known eczema susceptibility locus, we went on to investigate these mutations in atopic disease. This revealed that filaggrin loss-of-function mutations are a major risk factor for atopic eczema and associated allergic conditions, importantly including atopic asthma and allergic rhinitis (Nature Genetics 38:441-446, 2006; Nature Genetics 39:650-654, 2007). These studies have been very widely replicated, including in non-white populations. In light of recent genomewide association analysis, filaggrin is now recognised as the major gene for eczema. Currently, we are working to understand the gene-environment interaction that is clearly central to the pathogenesis of eczema, as well as developing new medicines aimed at improving skin barrier function in atopy.

09:45 - 10:40 UNDERSTANDING PHARMA Hall 1A

CHAIRS: Prof Christopher Bunker and Mr Howard May

09:45 Skin health – beauty and well-being



Dr Michèle Verschoore, Medical Director, L'Oréal Research & Innovation

To the extent that they help improve our appearance, cosmetics can affect how we relate to ourselves and to others, and as such can improve quality of life. Such benefits may be objectively demonstrated using validated methods and quality-of-life scales.

The aim of this review will be to assess the effects of cosmetics on well-being in various situations based on studies using objective measurement methods. It can be demonstrated that in pathological settings, the use of cosmetics can significantly improve the quality of life and well-being of patients, resulting in better acceptance of their disease and better therapeutic compliance. The use of cosmetics has also been shown to exert positive effects on self-esteem and social relations. A growing body of studies demonstrates the beneficial effects of cosmetics on well-being under normal physiological conditions. We can conclude that today, the effects and benefits of cosmetics can be measured objectively using quality-of-life scales, allowing initiation of actions for the rediscovery of well-being and self-esteem.

10:00

Basics of Dermatology Medicines Development

Dr Barbara White, SVP and Head of R&D, Stiefel

Learning Objectives:



- 1. Understand challenges in creating a significant value proposition for a new medicine in dermatology: creating value for patients, physicians, health agencies, and payers
- 2. Understand approaches to manage some common risks at different stages in development of medicines for dermatology, including some common challenges in topical formulations
- 3. Understanding the promise of translational medicine approaches in development of new medicines for dermatology

10:15

Quo Vadis, global dermatology

Mr Humberto Antunes, President and CEO, Galderma S.A



The world is changing rapidly. Those interested in dermatology wonder how the world will look and how their practice of medicine will be in 10, 20 or 30 years. The gloomy scenarios from the year 2000 have not taken place for the specialist in dermatology in 2013. In this talk, we will discuss some of the projections for global dermatology and how industry, academia and physicians can work together to improve patient outcomes and to shape a prosperous future for the practice.

10:40 – 11:00	Coffee	Hall 2
11:00 – 13:00	Annual General Meeting (members only)	Hall 1A
13:00 – 14:30	Lunch & Exhibition	Hall 2
13:15 – 14:15	MEDA SATELLITE SYMPOSIUM (PAGE 59)	HALL 11A & B
13:15 – 14:15	ABBVIE SATELLITE SYMPOSIUM (PAGE 60)	HALL 3A
13:15 - 14:15 13:15 - 14:15	ABBVIE SATELLITE SYMPOSIUM (PAGE 60) JANSSEN SATELLITE SYMPOSIUM (PAGE 59)	HALL 3A HALL 3B
		HALL 3B

18:15 – 19:00

18:15 – 19:00





WEDNESDAY

DETAILED PROGRAMME

14:30 – 16:00		SCIENTIFIC SESSION – MEDICAL DERMATOLOGY & SUBMITTED PAPERS	Hall 1A
	CHAIRS:	Dr Nick Levell and Dr Simon Meggitt	
14:30	MD01	Advances in hidradenitis management Prof Gregor Jemec (Copenhagen, Denmark)	
15:00	O-11	Infliximab for hidradenitis suppurativa; should we be measurilevels? Z. Laftah, Z. Arkir, E. Agius and N. Desai	ing antibody
15:15	O-12	A novel use for botulinum toxin A in the management of ileo urostomy leaks V. M. Smith and C.C. Lyon	stomy and
15:30	MD02	Mastocytosis management for the Dermatologist Dr Clive Grattan (Norwich, UK)	
16:00 – 16:30		Tea & Exhibition	Hall 2
16:30 – 18:00		Scientific Session – Medical Dermatology & Submitted Papers Continued	Hall 1A
	CHAIRS:	Dr Sarah Walsh and Dr Michael Ardern-Jones	
16:30	MD03	Systemic treatments for the photodermatoses Dr Robert Sarkany (London, UK)	
		Systemic therapy is a mainstay of treatment for the photodermatoses reasons. Firstly, some photodermatoses, including Porphyria Cutanea Vacciniforme and Lupus, are cutaneous manifestations of generalise diseases, requiring treatment of the underlying systemic disorder. So the Inflammatory Photodermatoses are severe and tend to require systemic immunosuppressant drugs, particularly severe Chronic Actinic and Actinic Prurigo. Thalidomide is the systemic immunosuppressant of Actinic Prurigo. Finally, we routinely use oral Psoralens as an immactivated by UVA, when we give PUVA.	Tarda, Hydroa d and systemic Secondly, some treatment with Dermatitis f choice in
17:00	MD04	Future psoriasis therapy beyond TNF-a blockade Prof Nick Reynolds (Newcastle, UK)	
		The introduction of biological therapies, primarily TNF inhibitors an has been transformational for patients with resistant moderate-to-who fulfill NICE eligibility criteria. However, patient surveys have she of dissatisfaction with current therapies, principally related to lack of lack of robustness of response. Nevertheless, recent insights into disease mechanisms of therapeutic action and of therapeutic failure are now retherapeutic agents such as anti-IL-17 antibodies and novel small molecuthe potential for individualization of therapy and c) possibility of inducin modifying the course of disease.	severe psoriasis own high levels of efficacy and/ se pathogenesis, ealizing: a) new ule inhibitors, b)
		However, the efficacy of therapeutic agents is variable and currently unboth primary and secondary failure (caused by lack/loss of efficacy and There is strong patient support for personalizing therapies to individual insights offer the potential of developing tests that predict therapeutindividual patients.	adverse events). patients. Recent
17:30	O13	The risk of postoperative complications in patients with psori psoriatic arthritis on biological therapy W. Bakkour, H. Purssell, H. Chinoy, C.E.M Griffiths and R.B Warren	asis or
17:45	O-14	Drug survival of fumaric acid esters for psoriasis: a retrospect N. Ismail, B. Kirby, P. Collins and A. Lally	ive study

NOVARTIS SATELLITE SYMPOSIYM (PAGE 60)

LEO PHARMA SATELLITE SYMPOSIUM (PAGE 61)

14:45 – 16:45		JOINT SESSION - BRITISH ASSOCIATION OF DERMATOLOGISTS AND BRITISH DERMATOLOGICAL NURSING GROUP	Hall 11A & B
	CHAIRS:	Dr Ferina Ismail and Carrie Wingfield	
14:45	JM01	Melanoma / targeted therapies Dr Louise Fearfield	
15:05	JM02	Skin Surgery: The Nurse Consultant's Perspective Carrie Wingfield	
15:25	JM03	Non melanoma skin cancer / pre-cancerous skin conditions Dr John Lear	
15:45	JM04	The development of BDNG Skin Cancer Nursing Competencies Saskia Reeken	
16:05	JM05	Skin cancer surgery / Mohs Dr Ed Seaton	
16:25	JM06	The Nursing Care of Patients on Systemic Medication for Malignant Mel Rachel Duncan	anoma
19:30 – 00:00		Annual Dinner	St George's Hall
19:30 – 23:00		BSDS Annual Dinner	The Athenaeum

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HALL 3A

HALL 3B



WEDNESDAY 10TH JULY – BRITISH SOCIETY FOR DERMATOLOGICAL SURGERY

TIME	CODE	PROGRAMME ROOM
14:00 – 17:10	0	BRITISH SOCIETY FOR DERMATOLOGICAL SURGERY HALL 1C
	CHAIRS:	Dr Graeme Stables and Dr Vindy Ghura
14:0	00 DS01	Safety, complications and patients' acceptance of Mohs micrographic surgery under local anaesthesia: results from the U.K. Mohs Acceptance and Patient Safety Collaboration Group W.S. Hussain, A. Affleck, F. Al-Niaimi, A. Cooper, E. Craythorne, C. Fleming, V. Ghura, J. Langtry, C. Lawrence, S. Loghdey, R. Mallipeddi, L. Naysmith, T. Oliphant, R. Rahim, S. Rice, M. Sivaramkrishan, G. Stables, S. Varma
14:0	07 DS02	Abstract withdrawn
14:1	4 DS03	Surgical excision vs. imiquimod 5% cream for basal cell carcinoma: a multicentre noninferiority randomized controlled trial H. Williams, F. Bath-Hextall, M. Ozolins, G. Colver, W. Perkins, S. Armstrong and P. Miller
14:2	21 DS04	Short-duration cold trypsinization as a novel method in noncultured epidermal suspension transplantation in stable vitiligo A.P. Holla
14:2	28 DS05	Analysis of a dermatopathology audit of Mohs section reporting by Mohs surgeons in a Mohs fellowship training dermatology surgery unit S.A. Rice, T.J. Oliphant, R.R. Rahim, C.M. Lawrence and J.A.A. Langtry
14:3	35 DS06	Change in histological diagnosis following Mohs micrographic surgery S. Verykiou, T.J. Oliphant, R.R. Rahim, C.M. Lawrence and J.A.A. Langtry
14:4	12 DS07	Two-centre audit of Mohs surgery using a U.K. national Mohs minimal dataset: next steps to test the agreed minimum dataset M. Sivaramakrishnan, A. Affleck, A. Evans, L. Naysmith, L. Macfarlane and C.J. Fleming
14:4	19 DS08	Five-year experience of the Johnson square procedure for lentigo maligna and lentigo maligna melanoma: the Nottingham experience of 15 cases A. Patel, W. Perkins, I. Leach and S. Varma
14:5	66 DS09	Curettage: an economical use of everyone's time? A retrospective audit into the treatment of cutaneous squamous cell carcinoma in a U.K. district general hospital C. Mitchell, W.A. Woo, E. Wakefield and J. Hextall
15:0	03 DS10	Skin adhesive use in cutaneous surgery Y.N. Lau, W. Hussain, C.M. Green and A. Affleck
15:1	0 DS11	Suspension sutures to achieve aesthetically favourable horizontal primary closure of infraorbital Mohs defects to avoid ectropion: a case series of six patients V. Samarasinghe and R. Mallipeddi



WEDNESDAY

Hall 2

15:17	DS12	The Z-plasty pedicle flap for enhanced cosmesis in upper cutaneous lip repair R. Urwin and W. Hussain
15:24	DS13	The 'apical lip flip' for challenging defects of the nasal ala R. Urwin and W. Hussain

CHAIRS: Dr Raj Mallipeddi and Dr Colin Fleming

Coffee Break



15:31 – 16:00

Guest Lecture

Dermatological Surgery; A view from the other side of the pond

Prof Chris Zachary (Irvine, California, USA)

25 years later, the transformation in British Dermatological Surgery is astounding. In 1987, there was a reluctance on the part of dermatologists in the UK to accept the concept that we should be performing anything but the most menial of surgical procedures. Those of us had surgery fellowship training in the US were considered odd ball, and somewhat inferior and certainly less significant than the 'complete dermatologist'. Thus started the slow transition, first in Mohs surgery and reconstruction, and then in laser and aesthetic medicine. There is an understanding in the US that dermatologists are more skilled and more economical than some of our other surgical specialists in the removal of skin cancers. And particularly in the field of lasers and devices, dermatological surgeons are preeminent in their development and utilization. This presentation will review some of the latest trends and surgical treatments for skin problems in the USA, and evaluate which side of the Pond is excelling in 2013!

		and more economical than some of our other surgical specialists in the removal of cancers. And particularly in the field of lasers and devices, dermatological surgeons preeminent in their development and utilization. This presentation will review some the latest trends and surgical treatments for skin problems in the USA, and evaluate whe side of the Pond is excelling in 2013!	are e of
16:45	DS14	A prospective study of secondary intention scalp wound healing and	
		outcomes following skin cancer excision S.A. Rice, T.J. Oliphant, C.M. Lawrence and J.A.A. Langtry	
1 (50	D.C.1.5		
16:52	DS15	The lenticular island pedicle flap for large centrofacial defects M.S. Shareef and W. Hussain	
16:59	DS16	The 'bridge rotation': a novel repair option for periocular and paranasal surgical defects R. Montgomery and W. Hussain	
17:10 – 17:45		BSDS AGM Hall 1C	
POSTERS	DS17	Variations in histological subtypes of basal cell carcinoma between initialbiopsy and final excision E. Storan, B. Moran and P. Ormond	
	DS18	Mohs micrographic surgery for desmoplastic trichoepithelioma: a report 11 cases S.A. Rice, T.J. Oliphant, C.M. Lawrence and J.A.A. Langtry	of
	DS19	'The spaghetti technique': a useful technique in the surgical managemen of lentigo maligna and lentigo maligna melanoma	t

S. Sidhu, A. Morris, K. May and R. Motley

micrographic surgery for skin cancers

S. Rajpara and C.J. Fleming

Potential use of patient-reported outcome measures after Mohs surgery M. Sivaramakrishnan, C.J Fleming and A. Affleck

Pilot study of use of 'photographic rhinometry' following Mohs





OS22	The 'inverted' advancement and inferior rotation of the nasal sidewall flap for defects of the medial canthus R. Urwin and W. Hussain
OS23	The specialist nonmelanoma skin cancer multidisciplinary team M.S. Shareef, W. Hussain, C. Fenn, F. Roberts, W. Merchant and G.I. Stables
OS24	Management of Merkel cell carcinoma in the south east of England: a retrospective cohort analysis of 67 cases over a 7-year period <u>G. Coltart</u> , J. Schofield and S. Coltart
OS25	A prospective qualitative study of patient satisfaction following secondary intention wound healing S. Verykiou, K. Aljefri, T.J. Oliphant and J.A.A. Langtry
OS26	Carcinoma cuniculatum on the heel treated pain free with Mohs micrographic surgery using ultrasound-guided sciatic nerve block A. Patel, N. Bedforth and S. Varma
OS27	Trends in incidence of invasive cutaneous squamous cell carcinoma in the north of Scotland over the last 35 years: implications for healthcare spending and the need for increased local sun protection advice A. Bonsall, E. Semple, E. Hussain and S. Rajpara
OS28	Improving cosmesis at the donor site using discarded skin following an interpolated paramedian forehead flap procedure M. Rajpopat and N. Sheth
OS29	'Skimming the surface': a review of split-thickness skin grafting practice and preferences among dermatological surgeons in the U.K. M.S. Shareef and W. Hussain
OS30	The contralateral subgaleal advancement-rotation flap for the single-stage repair of large defects of the lateral forehead and temple M.S. Shareef and W. Hussain
DS31	The 'shark-fin' flap for medium-to-large-sized defects of the preauricular cheek R. Montgomery and W. Hussain
OS32	Hidradenitis suppurativa: the surgical option J. Sullivan, N. Kelemen and S. Al-Ghazal
DS33	Cutaneous odontogenous sinus tracts: a clinician's dilemma M.S. Kumaran, T. Narang, S. Dogra and S. Bhandari
DS34	Destructive treatment of lymphangiomata with carbon dioxide laser and diathermy C. Duhovic, J. Soo, N. Kuganenderan, P. Mortimer and C.C. Harland
DS35	Immobilization of full-thickness skin grafts using a multilayered polyurethane foam dressing W.L. Ho, <u>K.E. Eustace</u> , P. Ormond and R. Barry
DS36	Double hatchet flap for reconstruction of lower-limb defects: technique and comparison with type II keystone flap F. Hussain and F. Muller

DS37	The merits of using alternate staining with toluidine blue and haematoxylin and eosin during Mohs micrographic surgery for basal cell carcinomas N. Anjum, P. Shepherd and G. Sega-Hall
DS38	Self-funding low-priority benign skin lesion surgery: an evaluation of a new service S. Anthony, F. Tatnall, K. Batta and K. Mead
DS39	Disparity in skin surgery patient information leaflets: do we need a national template? \underline{W} . Hunt and E. McGrath
DS40	Trilobed flap repair for nasal tip and alar defects in eight patients R.R. Rahim and J.A.A. Langtry
DS41	Use of the Skin Cancer Index to identify preoperative psychological morbidity A. Affleck, M. Moyes and C.J. Fleming
DS42	Laser resurfacing of facial hypertrophic scarring with an erbium: YAG laser D. Seukeran
DS43	An extremely delayed reaction following an intradermal filler: a case highlighting the need for tighter regulation and a U.K. register of adverse

events related to minimally invasive cosmetic procedures

W. Bakkour and T. Griffiths

BSDS PROGRAMME





WEDNESDAY 10TH JULY – BRITISH PHOTODERMATOLOGY GROUP

TIME CODE PROGRAMME ROOM

14:30 – 17:45 BRITISH PHOTODERMATOLOGY GROUP HALL 12

CHAIRS: Dr Robert Sarkany and Dr Christopher Edwards

BPG 2013 GUEST SPEAKERS

Modern Photopatch Testing: A product of co-operation between photo and contact dermatology groups

Prof James Ferguson (Dundee, UK)



14:30

Photocontact dermatitis is a recognised clinical problem which started with the sulphonamides, salicylanilides and antibacterial agents, the. Phototoxicity due to topical agents is well described as the phytophotodermatitis group due mainly to psoralen chemical and UVA exposure. Photoallergy, as investigated by photopatch testing has a history going back many years. Unfortunately it has long been recognised to be bedevilled by lack of a standardised technique. To a certain extent it has fallen between two subspeciality stools.

This problem needing a solution was recognised jointly by the European Photodermatology Group and the European Society for Contact Dermatitis. Some 13 years ago a joint task force was established by these Groups, Over the following decade a series of "interested expert" workshops produced consensus views of photopatch test methodology, essentially a movement to sort out the chaos of multiple methodologies, variable irradiation techniques and large unwieldly lists of photoallergens complicated by largely obsolete chemicals. The UK took on the lead role and has encouraged the new consensus methodology established by workshops with initially a UK and Dutch study which has been followed by Pan European work with a consensus modernised group of photopatch test chemicals, namely around the sunscreens and topical nonsteroidal anti-inflammatory agents. The appropriate use of this test system, as with photopatch testing, reveals the diagnosis in patients with an unexplained photoexposed site dermatitis.

This joint activity has popularised a standardised methodology throughout Europe. It is expected that patients will now also benefit from a commercially available adapted standard European photopatch test list of agents. It is an agreed view that photoallergy is an underdiagnosed skin condition.

15:05 **The Photobiology of Vitamin D**Prof Antony Young (London, UK)

CHAIRS: Dr Robert Dawe and Dr Victoria Goulden

15:40 PD01 Patients with xeroderma pigmentosum complementation groups C, E and V do

not have abnormal sunburn reactions

M. Sethi, A. Lehmann, A. Robson, D. McGibbon, R. Sarkany and H. Fassihi

15:55 PD11 MMP12 is induced by UVA1 but not UVB

A. Tewari, K. Grys, R. Sarkany and A. Young

16:10 PD03 **Self-administration of hospital-based narrowband UVB (TL-01) phototherapy:**

a feasibility study in an outpatient setting

S. Yule, S. Sanyal, S. Ibbotson, H. Moseley and R.S. Dawe

16:25 Coffee Break Hall 2

17:00 PD04 Evaluation of patient's and healthcare professional's knowledge and views about home phototherapy.

S. Lumley, K. Salako and Alex Anstey

17:15 PD05 A regional audit of phototherapy services

R. Urwin, D. Turner and V. Goulden

17:30 PD06 An overview of patients investigated in the National Photodiagnostic Service

Hall 12

in a tertiary setting over a 22-year period

H. Naasan, R.S. Dawe, H. Moseley and S. Ibbotson

17:45 Close of meeting

17:45 – 18:15 BPG AGM

dose device
D. Turner and V. Goulden

PD08 Subcutaneous panniculitis-like cutaneous T-cell lymphoma treated with UVA-1 phototherapy
V. M. Smith, R. Rose and V. Goulden

PD09 An illustrative case series of X-linked dominant protoporphyria
M. Seager, S. Whatley, A.V. Anstey and T. Millard

PD10 Do display monitors and 'tablet' screens emit sufficient UVA or UVB to affect photosensitive patients?
A. Patel, E. Burden-Teh, M. Lam, P. Akram, R. Farley and S. Varma

PD12 2011–2012 Audit and survey of phototherapy services in the West Midlands (UK)

Determination of optimum operating point for hand held minimum erythema

POSTERS

PD07

J.Powell and M. Kaur

WEDNESDAY PROGRAMME



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THURSDAY 11TH JULY – OVERVIEW

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ROGRAMM

THURSDAY 11TH JULY – DETAILED PROGRAMME





12:00 Herpes zoster vaccine effectiveness against incident herpes zoster and post-herpetic neuralgia in an older US population

S.M. Langan, L. Smeeth, D.J. Margolis and S.L. Thomas

GL04 12:15 **Arthur Rook Oration**

Guest Lecture - Introduced by Professor Christopher Bunker

Hall 1A

Understanding skin disease through the perspective of innate immunity

Professor Richard Gallo (San Diego, USA)

The skin protects itself with barriers to the environment and by detecting danger from the environment. Antimicrobial peptides are a critical element of the defensive barrier, while a variety of pattern recognition receptors such as the Toll-like receptors (TLRs) are key to detecting injury. This presentation will describe these findings and discuss their relevance for clinical dermatology.

13:00 - 14:30 Lunch & Exhibition Hall 2

FOCUS SESSION: CLINICAL SERVICES 13:15 - 14:00 HALL 1C

The Clinical Services Focus session will be hosted by Dr Graham Sharpe, Clinical Vice President and Tania von Hospenthal, Clinical Services Manager with guest speaker Roy Lilley, an established, independent health policy analyst, writer, broadcaster and commentator on health and social issues.

The session will focus on the new commissioning landscape and the many facets of service design, to assist members with meeting these challenges. Commissioning of dermatology services seems increasingly complicated within the new NHS structure, particularly with CCGs stepping into the role of commissioner for acute and community dermatology services. We will outline important aspects to help departments deal with commissioning and improve their own service provision, presenting some of the resources which are currently being developed by the CSU for members.

The CSU would like to draw up a Commissioning FAQ ahead of the session targeting members keys concerns. In order to do this, we be contacting members attending the focus session, in advance of the day.

13:15 - 14:00 **FOCUS SESSION: DERMOSCOPY** HALL 3A

Speakers: Dr Jonathan Bowling and Dr Andrew Affleck Content: In this 45 minute action packed focus session the speakers will cover:

- Novel dermoscopic features of melanoma in situ
- Tropical dermoscopy the merits of ex-vivo dermoscopy
- Results of the UK dermoscopy survey
- Dermoscopic pitfalls and pearls

5:15 - 14:00	FOCUS SESSION: GENITAL DERMATOLOGY	HALL IIA 8
13:15	What are the BSSVD and the BSMGD?	
	Dr Jennifer Yell and Dr William Porter	
13:25	The importance of pathology in the diagnosis of genital der	rmatology
	Dr Luisa Motta, Consultant Dermatopathologist, Salford	
13:40	How best to treat "pelvic" pain	
	Dr Winston F de Mello, Consultant in Pain Medicine, Manchester	
13:55	Final minutes: Any questions?	



Tell for the for

14:30 - 18:00		CONTINUING PROFESSIONAL DEVELOPMENT SESSION	Hall 1A
	CHAIRS:	Dr Graham Sharpe and Dr Richard Parslew	
14:30	CPD01	What's New in Infectious Diseases Dr Mahreen Ameen (London)	
15:00	CPD02	What's New in Contact Dermatitis	

Guest Lecture - Introduced by Prof Christopher Bunker

Dr Mark Wilkinson (Leeds)



15:30 GL05

A Current Therapeutic Armamentarium for Chronic Idiopathic and Autoimmune Urticaria/Angioedema
Professor Nicholas A. Soter (New York, USA)

H1-type antihistamines are the therapy of choice in the management of patients with chronic idiopathic or autoimmune urticaria/angioedema. For patients who have failed to benefit from antihistamines, alternative therapeutic measures may be considered. In double-blind trials, the addition of leukotriene receptor inhibitors, nifedipine, dapsone, or dipyridamole to antihistamines achieved beneficial responses. Colchicine, hydroxychloroquine, cyclosporine mycophenolate mofetil, tacrolimus, methotrexate, high-dose intravenous immunoglobulin, plasmapheresis, and narrow-band ultraviolet B phototherapy have been of benefit in clinical trials. Biologic agents were successfully used anecdotally in a few patients. Thus, additional levels of threapuetic agents are available for the treatment of refractory disease.

16:00 – 16:30		Coffee Break	Upper Level
16:30	CPD03	Trends in Dermatological Surgery Dr Raj Mallipeddi (London)	
17:00	CPD04	What's new in General Medicine for Dermatologists Dr Catherine Orteu (London)	
17:30		President's Address Professor Christopher Bunker	
17:45		Close of meeting	

POSTERS

The posters are situated within the Exhibition Hall and there will be a dedicated poster viewing hour on **Tuesday July 9th from 13:00 – 14:00**. All presenting authors have been asked to stand by their poster at this time. There will also be an e-poster display area within the Exhibition Hall.

BRISTOL CUP POSTERS

Clinicopathological Cases

- P01 A case of diffuse dermal angiomatosis related to a breast implant
 - C. Kwok, M. Shareef, S. Edward and M. Wilkinson
- P02 Metastatic basal cell carcinoma
 - N. Salmon, L.A. Fearfield, M. Gore and J. Larkin
- P03 Animal-type melanoma: how should we manage this rare entity?

 C. Sinclair, S. Allan, I. Nawroz and S. Fraser
- P04 Three generations of hereditary leiomyomatosis associated with renal cell cancer Z. Venables, A. Ramaiya, S. Holden and G.W.M. Millington
- PO5 Dermatoses localizing to radiotherapy sites
 - R. Hellen, C. Kiely, A. Murad, P. Lenane, F.J. Moloney and N. Mulligan
- P06 Churg-Strauss presenting with urticated skin lesions
 N. Salmon and L.A. Fearfield
- P07 Female-pattern hair loss in a hypopituitarism: possible response to androgen replacement therapy
 - A. Jamil and A. Messenger
- P08 Dössekker tuberous myxoedema revisited: a rare variant of scleromyxoedema F.R. Ali, P. Ho, I.H. Chaudhry, L. Motta and R.J.G. Chalmers
- P09 Urticarial vasculitis associated with an acquired reactive perforating collagenosis in pregnancy F. Worsnop, S. Eriyagama, J. Wee, B. Ho and J. Natkunarajah
- P10 de Toni-Fanconi syndrome secondary to fumaric acid esters
 - C. Reid, J. Holian, D. Kane and B. Kirby
- P11 First case report of localized bullous pemphigoid occurring on an oedematous leg secondary to chronic superficial femoral artery occlusion
 - J. Dua, E. Davies, A. Gafita, C. Rodriguez-Garcia and S.A. Grabczynska
- P12 The psychological impact of a diagnosis of basal cell carcinoma S. Noel, D. Dunn and R. Wilson
- P13 Toxic epidermal necrolysis-like lupus
 - N. Spierings, L. Ffolkes and V. Akhras
- P14 Erythema multiforme caused by ingestion of atropine eye drops: a previously unreported phenomenon
 - F. Latheef, R. El-Naes and R.M. Strauss
- P15 Primary cutaneous cryptococcosis in a patient with chronic lymphocytic leukaemia treated with alemtuzumab
 - E. Storan, W. Ho, M. McMenamin and B. Wynne
- P16 Biological switching: infliximab- and adalimumab-induced folliculitis
 - F. Worsnop, K. Misch and J. Natkunarajah
- P17 Flucloxacillin-induced unusual drug reaction in a child: an example of epitope spread M. Chattopadhyay, S. Haque-Hussain, E. Rytina and T.K.K. Ha
- _____
- P18 Leukaemia cutis mimicking pyoderma gangrenosum

Y. Mansouri, T.T. Lew and J.M.R. Goulding

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OSTERS





- Atypical hidradenitis suppurativa involving nonflexural body sites
 - A. Affleck and H. Nassan
- Multiple exquisitely painful leg ulcerations in a teenager **P20** J. Brockley, H. Recica, S. Tso and A. Ilchyshyn
- Lupus erythematosus and inclusion body myositis: an important association P21
 - R. Green, L. Motta, R.G. Cooper and R.B. Warren
- Papuloerythroderma of Ofuii: case report and review of the literature
 - Y. Mansouri, B. Stranks, P. Colloby, E. Todd and M.R. Kaur
- **P23** Novel mutation in keratin 10 causing autosomal dominant epidermolytic ichthyosis
 - R. Lamb, A. Terron-Kwiatkowski, J. Lang, I. McLean and M. Zamiri
- **P24** Langerhans cell histiocytosis: treatment of cutaneous disease with azathioprine
 - A. Rao and A. Chu
- Multiple halo naevi associated with tocilizumab treatment P25
 - K.H. Kuet and M.J.D. Goodfield
- **P26** Acute necrotizing eosinophilic myocarditis: a rare complication of sulfasalazine-induced drug reaction with eosinophilia and systemic symptoms syndrome. A case report
 - C. Mitchell, W.A. Woo and J. Hextall
- **P27** Identification of a novel mutation causing Bloom Syndrome with no facial telangiectasia or
 - ervthema
 - J. Powell, N. Cooper and F. Browne
- Vemurafenib-exacerbated eruptive disseminated syringomas
 - C. Haddadeen, C. Morgan, K. Hussein, R. Osborne and A. Belgi
- **Autonomic leuconvchia**
 - L. Newell and D.A.R. de Berker
- X-linked recessive dyskeratosis congenita: an important dermatological diagnosis
 - J. Powell, C. Moss, I. Dokal, R. Carr, S. Taibjee and B. Cave
- Clouston syndrome caused by a heterozygous mutation in connexin 30, resembling
 - pachyonychia congenita
 - G. Hale, N. Wilson, F. Smith and M. Zamiri
- Multicentric reticulohistiocytosis treated with adalimumab
 - S. Verma, N. Ralph and P. Collins

Education, Training, Service, Audit

- An audit of acute dermatology referrals at a district general hospital
 - B. Shaheen and C. Soon
- P34 Dermatology on-call service: is it really necessary?
 - N. Anjum, L.H. Lee, A. Haworth and B. Hughes
- The U.K. Dermatology Clinical Trials Network Trainee Group: developing evidence-based practice and research engagement among dermatology trainees
 - R.N. Matin, J.M. Batchelor, C. Flohr, A.E. Macbeth, E. Smith, C. Layfield, J.R. Ingram and H.C. Williams
- Is dermatology a forgotten subject within core medical training?
 - N. Harper, S. Hamer and J. Bong
- An audit to support the need for emergency dermatology training
 - V. Pinder, F. Worsnop, J. Wee and L. Ostlere
- Addressing a lack of dressings knowledge
 - C. Wootton and P. Whitehead

- The 5-year itch: comparison of walk-in vs. choose-and-book emergency dermatology clinics in 2007 and 2012
 - N. Spierings, F. Worsnop, R.A. Marsden and V. Akhras
- P40 Dermatology training in the U.K.: does it reflect the diversity of our population?
 - A. Salam and O.E. Dadzie

General Dermatology

- Infections in the ustekinumab psoriasis clinical trial programme: final report with up to 5 years of follow-up
 - B. Strober, P.D. Ghislain, M. Lebwohl and P. Szapary
- P42 Utility of a national hair microscopy service
 - J. Nesbitt and D.A.R. de Berker
- P43 The revised Leeds acne grading scale: how accurate and clinically useful is it?
 - F. Latheef, A. Eady, R. El-Naes and A. Layton
- Post-traumatic stress disorder following drug reaction with eosinophilia and systemic symptoms
 - T.T. Lew, D. Creamer and S. Walsh
- Malignancies in the ustekinumab psoriasis clinical development programme: final report with P45 up to 5 years of follow-up
 - K. Papp, K. Gordon, V. Ho and P. Szapary
- Psychological impact of delusional infestation: preliminary results
 - R. Shah and A.P. Bewley
- P47 Practical experience of biological treatment of very severe psoriasis: a retrospective case-cohort
- study of patients with a baseline Psoriasis Area Severity Index score greater than 20
 - N. Ponnambath, M. Kalavala, A.V. Anstey, V. Piquet and J.R. Ingram
- One person's pink is another person's purple
 - R. Ellis, D. Chew and N. Rajan
- Differences in psoriasis severity and exposure to immunomodulatory therapies between P49
 - cigarette smokers and nonsmokers: observations from the Psoriasis Longitudinal Assessment and Registry in patients with moderate to severe psoriasis
 - J. Walsh, F. Kerdel, G. Krueger and D. Amato
- P50 Red scrotum syndrome: a clinicopathological study
 - T. Narang, S. Dogra, M.S. Kumaran and U.N. Saikia
- P51 A clinical audit of the effect of targeted advice and vitamin D supplementation on serum
 - vitamin D levels in patients with melanoma
 - S. Field, J. Davies, A. Mitra, H. Peach, D. Dewar and J.A. Newton-Bishop
- Psoriasis, comorbidities and lifestyle: what is the patient's understanding of it? P52
 - S.H. Foo, G. Stewart, T. Michelle and E. Ladoyanni
- Do dermatologists really know the costs of the investigations they request? A survey of dermatologists in practice
 - F. Latheef and M. Shah
- Fatigue as a symptom in psoriasis and psoriatic arthritis
 - M. Sadlier, R. Fitzgerald, P. Collins, S.C.F. Rogers, O. FitzGerald, B. Kirby and A. Tobin
- Patch testing practice in the U.K.
 - B.S. McDonald and D.A. Buckley
- **P56** How are patients with actinic keratoses managed in primary care?
 - S. Sanyal, A. Holme and D. Kemmett



Teathy Skin for

Skin Cancer

P57 Five-year recurrence rate of lentigo maligna after treatment with imiquimod determined using in vivo confocal microscopy

A. Kai, T. Richardson, A. Coleman, R. Mallipeddi and E. Craythorne

P58 Incidence of primary cutaneous T-cell lymphoma in Wales

R. Abbott, S. Dojcinov, C. Aldridge and V. Piquet

P59 Progress towards integrating a melanoma diagnostic index into a U.K. dermatology department quality dashboard

P. Gazzani, J. Rothwell, C. Kasparis and B. Gee

P60 The treatment of cutaneous metastatic melanoma with topical diphencyprone

N. Spierings and V. Akhras

P61 The perils of using national cancer surveys to reflect local departmental practices

N. Anjum, C. Coley and A.E. Haworth

P62 Abstract withdrawn

P63 The management of narrowly excised cutaneous squamous cell carcinomas

D. Jain, S. Verykiou, M. Vatve and S. Wahie

P64 Electronic patient booking and quality measures in skin cancer management

G. Fremlin, A.P.J.J. Bray and D.A.R. de Berker

P65 Two-week waits, adherence to referral guidelines, and rate of secondary malignancy in the

suspected cancer clinic

E.E. Merika and L.A. Fearfield

Therapy

P66 Iontophoresis for hyperhidrosis: effectiveness of treatment

C. Sharpe, J.K. Schofield and N.C. Hepburn

P67 Predictors of response to increasing the dose of etanercept: results of an audit

K. Aljefri, P.J. Hampton and N.J. Reynolds

P68 Audit of potent topical steroid use among new psoriasis patients referred to a dermatology

department

C. Reid, K.E. Eustace, C. Keating, R. Hughes, S. Verma, R.B.M. Barry, P. Collins, A. Lally and B. Kirby

P69 Topical immunotherapy with diphenylcyclopropenone for alopecia areata: our experience

N.Y.Z. Chiang and A. Abdullah

P70 Delusional infestation and patient adherence to treatment

A. Ahmed and A.P. Bewley

P71 Review of the use of diphencyprone in the treatment of alopecia areata: the last 20 years in

Glasgow

R.C. Lamb and S.C. Holmes

P72 Pro forma improves compliance with NICE guidance in the assessment and management of atopic eczema in children under 12 years

K. Scharrer, K. Radley, K. Hussain, N.C. Hepburn and J.K. Schofield

P73 Xeomin® vs. Botox® in the treatment of severe axillary hyperhidrosis

T. T. Lew, A. Francis, M. De Vos, N. Baksh and R. Morris-Jones

P74 Use of botulinum toxin injections to treat notalgia paraesthetica

J. Collins, S. Kamath and J.R. Hughes

P75 Inflammatory leg ulcers: do not forget compression

N. Clayton, C.L. Lowry and R.H. Bull

P76 Tuberculosis screening of patients on biological therapies: linking clinical practice to national

idelines

P. Mahendram, M.A. Hack, R.G. Goodwin, T. Bale and A.V. Anstey

P77 Cardiovascular safety in the ustekinumab Clinical Development Programme: final update with up to 5 years of follow-up

K. Reich, M. Lebwohl, C.E.M. Griffiths and P. Szapary

P78 Targeted cognitive behavioural therapy is effective in reducing alcohol misuse in patients with

moderate to severe psoriasis

O. Founta, K. Adamzik, C. Reid, A-M. Tobin, D. Hevey and B. Kirby

P79 Traditional antiseptics show ineffective antistaphylococcal bactericidal activity

C. Leitch, A. Leitch and M.J. Tidman

P80 Distinguishing between bioequivalence and bioavailability: the pitfalls of switching brands in ciclosporin prescribing

F. Latheef, S. Das and B.P. Walker

P81 Randomized controlled study to evaluate the effectiveness of dexamethasone oral minipulse

therapy vs. oral minocycline in patients with active vitiligo vulgaris

A. J. Kanwar, A. Singh and D. Parsad

P82 Evaluation of the bactericidal activity of an antiseptic emollient wash formulation against

Panton-Valentine leucocidin-producing Staphylococcus aureus

J. Gallagher, P. Rosher, J. Leeming and A. Hidalgo-Arroyo

P83 White's tar paste as an outpatient-based treatment for psoriasis

R. Fitzgerald, K.E. Eustace, F. Carroll, A. Kavanagh, B. Kirby, P. Collins and A. Lally

P84 Analgesia requirements in toxic epidermal necrolysis: unmeasured and unmet?

B. Moriarty, R. Lamb, A. Durack, C. May, C. Smith, C. Fagan, D. Creamer and S. Walsh

P85 Long term prophylactic management of hereditary angio-oedema, a rare but important cause of

referrals to dermatology

J.M. Kassim and C. Grattan

P86 Our experience of transient elastography and Fibrotest® in monitoring patients taking

methotrexate for psoriasis

M. Lynch, E. Higgins, P.A. McCormick, B. Kirby, A. Lally, S. Rogers, A. Vellinga, H. Omar and P. Collins

Therapy with rituximab for pemphigus and pemphigoid: a retrospective study of 103 patients K. Heelan, S.R.A. Walsh and N.H. Shear

P88 A prospective, double-blind, randomized controlled trial of folic acid supplementation vs.

placebo in patients with chronic plaque psoriasis treated with methotrexate and effects on

serum homocysteine

P.D. Yesudian, N. Hashim, A. Bharati, A. Alkali, R.B. Warren, T. Cox and R.A.G. Parslew



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WEDNESDAY 10TH JULY – SATELLITE SYMPOSIUM

TIME	PROGRAMME	ROOM
08:00 - 08:45	ALMIRALL LTD SATELLITE SYMPOSIUM	HALL 3A

Old age, new evidence in dermatology

New, exciting evidence in older patients will be discussed with our 'Question Time' style expert panel including:

Hosted by Michael Barratt (writer, journalist and a former BBC television presenter)

Professor Michael Cork

Dermatologist, University of Sheffield

Professor Eggert Stockfleth

Dermatologist, Charité - Universitätsmedizin Berlin

Professor Peter Passmore

Ageing and Geriatric Medicine, Queen's University Belfast

Sheila Robertson

Dermatology Liaison Nurse Specialist

WEDNESDAY 10TH JULY – SATELLITE SYMPOSIUM

TIME	PROGRAMME	ROOM
08:00 – 08:45	BEIERSDORF SATELLITE SYMPOSIUM	HALL 3B
	Hyperpigmentation – Facing the Challenge	
CHAIR:	Dr Yuliya Zielinski	
	The cosmetic use of skin lightening agents: merits, challenges and or Ophelia Dadzie , London	controversies!
	4-n-butylresorcinol: a highly effective tyrosinase inhibitor that redu hyperpigmentation Dr Ludger Kolber, Hamburg	ıces
	Questions and Answers Dr Yuliya Zielinski	

WEDNESDAY 10TH JULY – SATELLITE SYMPOSIUM

TIME	PROGRAMME	ROOM
13:15 – 14:15	JANSSEN SATELLITE SYMPOSIUM	HALL 3B
CHAIRS	Treating the whole patient: The joint approach Should dermatologists and rheumatologists work more closely whole patient? Join us for a lively discussion looking at patient case studies.	y together to treat the
CHAIRS:	Panel members: Dr Ruth Murphy, Dermatologist, Nottingham Dr Ira Pande, Rheumatologist, Nottingham Dr Mark Goodfield, Dermatologist, Leeds Prof Dennis McGonagle, Rheumatologist, Leeds Dr Tony Downs, Dermatologist, Exeter	

WEDNESDAY 10TH JULY – SATELLITE SYMPOSIUM

Dr Richard Haigh, Rheumatologist, Exeter

TIME	PROGRAMME	ROOM
13:15 - 14:15	MEDA PHARMACEUTICALS SATELLITE SYMPOSIUM	HALL 11A & B
	Current Controversies in the Management of Actinic Keratoses Debate	e
CHAIR	Dr Colin Fleming, Dundee	
	Welcome, Introduction & Audience Voting Dr Colin Morton	
1st Proposer	Treat the entire field - clinical and sub-clinical lesions Professor Eggert Stockfleth, Berlin	
1st Opposer	Treat what you see or should you treat at all? Professor Rino Cerio, London	
2nd Proposer	Dr Chris Bower, Exeter	
2nd Opposer	Dr Jonathan Bowling, Oxford	
	Conclusions & Audience Voting Dr Colin Fleming	





WEDNESDAY 10TH JULY – SATELLITE SYMPOSIUM

TIME	PROGRAMME	ROOM
13:15 – 14:15	ABBVIE SATELLITE SYMPOSIUM	HALL 3A

Refining our approach to the management of psoriatic disease

- Are you interested in changing clinical practice and improving the psoriatic patient pathway?
- Do you want to help develop practical tools to overcome some of the challenges we face in joint dermatology–rheumatology working?

Join a distinguished multidisciplinary faculty in this brainstorm as we begin to develop a simple useable tool to facilitate collaborative working in line with NICE guidelines and Quality Standards.

Faculty

Dr Richard Warren

Dermatologist (Manchester)

Dr Joyce Leman

Dermatologist (Glasgow)

Dr Hector Chinoy

Rheumatologist (Manchester)

Dr Laura Coates

Rheumatologist (Leeds)

Professor Nick J Reynolds.

WEDNESDAY 10TH JULY – SATELLITE SYMPOSIUM

710.05		DOOM
TIME	PROGRAMME	ROOM
18:15 – 19:00	NOVARTIS SATELLITE SYMPOSIUM	HALL 3A
	Psoriasis in depth: A stratified approach to treating psoriasis	
CHAIRS:	Professor Nick J Reynolds, Institute of Cellular Medicine, Newcastle University,	UK.
	Right patient, right drug, right time Dr Richard Warren, Salford Royal Foundation Hospital, UK Dr Warren assesses the potential of personalised treatment to overcome the limitat therapies.	tions of current
	The role of IL-17 in psoriasis and inflammatory arthritides Dr David Lee, Novartis Institutes for BioMedical Research, Basel, Switzerland. Dr Lee considers recent immunological research and insights that could lead to new targets.	w therapeutic
	Audience questions	

The panel share their experience and answer questions from the audience.

WEDNESDAY 10TH JULY – SATELLITE SYMPOSIUM

TIME	PROGRAMME	ROOM
18:15 – 19:00	LEO PHARMA SATELLITE SYMPOSIUM	HALL 3B
	Picato®, Actinic Keratosis (AK)* and the Patient	
18:15	Current therapies for AK patients in the UK Dr John Lear, Consultant Dermatologist, Manchester Royal Infirmary and Ho	ppe Hospital, Salford
18:25	Picato® within AK* treatment Dr Sandeep Cliff, Consultant Dermatologist and Dermatological Surgeon, Easurrey and Sussex Healthcare NHS Trust	ast Surrey Hospital,
18:40	The Picato® patient experience Dr Tony Downs, Consultant Dermatologist, Royal Devon and Exeter NHS Fo	oundation Trust
18:55	Question and answer session Dr John Lear	

^{**}Picato® is licensed for the cutaneous treatment of non-hyperkeratotic, non-hypertrophic actinic keratosis in adults.

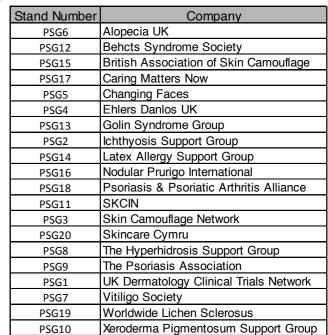


The ACC Exhibition Plan

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68	Almirall Ltd
6	Aneurin Bevan Health Board Academic Dermatology
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74	BAD Communications
44	BAD Historical Collection
63a	BAD Journals
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18	Bayer Healthcare plc Beiersdorf
73	Bio-Diagnostics Ltd
	Blink Medical Ltd
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20	Celgene Ltd
63b	Clinical Services Unit
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63c	Community Dermatology & IFD
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25	Cynosure UK Ltd
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e-Posters





93rd Annual meeting of the British Association of Dermatologists

EXHIBITION PLAN



DIRE

EXHIBITO

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Maidenhead, SL6 4XE Phone: 01628 773 355 Contact: Chris Barton

Email: christopher.barton@abbvie.com

www.abbott.com

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Stand Number: 80

1 Lancaster Park, Needwood, Burton on Trent, DE13 9PD

Phone: 01283 576 800 Contact: Nicki Haynes

Email: nickihaynes@activahealthcare.co.uk

www.activahealthcare.co.uk

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www.hydromol.co.uk / www.alliancepharma.co.uk

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Contacts: Natalie Marley, Margarita Pifarre, Samantha Howell

Email: info.uk@almirall.com

www.almirall.com

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Aneurin Bevan Health Board Academic Dermatology

Stand Number: 6

St Woolos Hospital, Academic Dermatology,

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Contact: Jane Jones

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British Association of Dermatologists Biologic Interventions Register (BADBIR)

Stand Number: 53

BADBIR, The University of Manchester, Rutherford House (Unit 1 FF), Manchester Science Park, 40 Pencroft Way, Manchester, M15 6SZ

Tel: 0161 306 1896

Contact: Kathleen McElhone - BADBIR Coordinator

Email: badbir@manchester.ac.uk

www.badbir.org

The BADBIR is a national register of patients receiving therapy for the treatment of moderate to severe psoriasis in the UK. Data is collected on patients treated with biologics or other systemic treatments (for control purposes). The primary aim of the register is to monitor the safety of biologic agents.

BAD Communications

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Tel: 02073916094 Contact: Nina Goad Email: comms@bad.org.uk www.bad.org.uk

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Contact: Dr Nick Levell Email: nick.levell@nnuh.nhs.uk

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Contact: John Caulfield, Editorial Manager

Email: john@bad.org.uk www.bad.org.uk

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Stand Number: 73

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Email: enquiries@bio-diagnostics.co.uk

www.bio-diagnostics.co.uk

Blink Medical Ltd

Stand Number: 261320 Solihull Parkway, Birmingham Business Park,

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Contact: Roger Tyler, Managing Director

Email: sales@blinkmedical.com www.blinkmedical.com

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Contact: Christina Cockley
Email: christina.cockley@bms.com

At Bristol-Myers Squibb, we are committed to finding innovative medicines to combat serious diseases, and to getting them to patients in the UK and worldwide faster and more efficiently. We have a strong legacy in discovering and developing cancer medicines dating back 40 years and our researchers continuing pursuit of new strategies to answer the unmet needs of patients has resulted in the emergence of a robust pipeline of anti-cancer agents. Identification of specific targets has facilitated the creation of molecules designed for their potential to inhibit tumour growth, survival and metastasis.

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DIRE

H B H

British Skin Foundation

Stand Number: 32

Willan House, 4 Fitzroy Square, London, W1T 5HQ Tel: 0207 391 6341

Email: admin@britishskinfoundation.org.uk

www.britishskinfoundation.org.uk

The British Skin Foundation is the only UK based charity dedicated to funding research into all skin diseases.

Brymill Cryogenic Systems (UK) Ltd

Stand Number: 27

54 Mayfield Ridge, Basingstoke, RG22 4RS Tel: 01256 841 045

Contact: Steve Williams Email: sales@brymilluk.com

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www.clinisupplies.co.uk

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Community Dermatology & IFD

Stand Number: 63c

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Tel: 0207 391 6346 Contact: John Caulfield Email: john@bad.org.uk www.bad.org.uk

Crawford Healthcare Ltd

Stand number: 13

King Edward Court, King Edward Rd, Knutsford, Cheshire, WA16 OBE

Tel: 01565 654920

Contact: Karen Kennedy Email: info@crawfordpharma.com www.crawfordhealthcare.com

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Email: jenny@cynosureuk.com

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Contact: Ben Saviger-Jones / Jenny Flood

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Stand Number: 34

ARC Progress, Mill Lane, Stotfold, Bedfordshire, SG5 4NY

Tel: 01462 733 500 Contact: Phil Carroll Email: info@dermauk.co.uk www.dermauk.co.uk

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Stand Number: 58

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www.deximune.co.uk

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Tel: 01908 376 376 Contact: Jim Khambatta Email: info@diagenics.co.uk www.diagenics.co.uk

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www.drhoenle.de

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Stand number: 66

Park View House, 65 London Road, Newbury, Berkshire,

RG14 1IN

Tel: 01635 568 400 Contact: Eric Sharp

Email: info@genuspharma.com

www.genuspharma.com

Genus Pharmaceuticals is a medium sized pharmaceutical company committed to providing quality healthcare products and services, focusing on specialised therapy areas, providing a responsive and friendly service to our customers whilst helping to ensure a positive difference for patients. Our expertise lies in Dermatology and Parkinson's Disease, substance misuse and tuberculosis.

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Contact: Sunil Shaunak

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LEO Pharma

Stand Number: 14

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Email: general.uk@leo-pharma.com

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Recommended by over 25,000 dermatologists. Sensitive skin specialist.

Launched in 2009 in the UK, La Roche-Posay is committed to Dermatology offering a wide range of adjunctive therapy products for the main reasons of consultation in Dermatology practice.

Since 2009 La Roche-Posay has achieved great success with the launch of Anthelios XL, the highest SPF rated photo protection, which is also now available on prescription.

We support patient and professional education events together with extensive research in the field of Dermatology.

Meda Pharmaceuticals Ltd

Stand Number: 19

Skyway House, Parsonage Road, Takeley, Bishop's Stortford, CM22 6PU

Tel: 0845 460 0000

Email: info@medapharma.co.uk

www.meda-psm.com

At Meda, we're constantly evolving our impressive product range. In the UK we currently have over 70 products, including many well-known prescription, pharmacy and cosmetic brands.

Our ever-expanding product portfolio covers a wide range of treatment areas from allergy, cardiology and dermatology, to oncology and sexual health.

Within Dermatology we have just launched Zyclara 3.75% Imiquimod Cream for the topical treatment of clinically typical, nonhyperkeratotic, nonhypertrophic, visible or palpable actinic keratosis (AK) of the full face or balding.

medac GmbH

Stand number: 47

Scion House, Stirling University Innovation Park, Stirling, FK9 4NF

Tel: 01786 458 086

Email: info@medac-uk.co.uk www.medac-uk.co.uk

medac is a German based pharmaceutical manufacturer with a growing number of branches around the world.

Metoject (methotrexate injection 50 mg/ml) was launched by medac and is indicated for the treatment of severe recalcitrant disabling psoriasis which is not adequately responsive to other forms of therapy.

Mölnlycke Health Care

Stand Number: 55

Arenson Centre, Arenson Way, Dunstable, Bedfordshire, LU5 5UL

Tel: 0800 7311 876

Email: info.uk@molnlycke.com

www.molnlycke.co.uk

Mölnlycke Health Care manufactures and markets a range of dermatology products for eczema, psoriasis and other dry skin conditions including; Epaderm® Ointment, Epaderm® Cream and Tubifast® Garments.

EXHIBITOR

DIRECTORY

Molnlycke offers a product portfolio with which to meet the needs of health care professionals in hospitals and primary care organisations.

MSD (Diprobase)

Stand number: 61

Hertford Road, Hoddeson, Hertfordshire, EN11 9BU Tel: 01992 455 423

Contacts: Ellen Edwards, James Cotterell, Julie Dixon Email: julie.dixon@merck.com

www.diprobase.co.uk

The Diprobase emollient range has been patient friendly for 30 years. The formulations are tried and trusted making it the UK's number 1 most GP prescribed emollient. Diprobase is an MSD – Consumer Care product.

Today's MSD is a global healthcare leader working to help the world be well. MSD is a tradename of Merck & Co., Inc., with headquarters in Whitehouse Station, N.J., U.S.A.

Novartis Pharmaceuticals UK Ltd

Stand Number: 65

200 Frimley Business Park, Frimley, Surrey, GU16 7SR, United Kingdom

www.novartis.co.uk

At Novartis, our goal is to provide high quality healthcare solutions to address the evolving needs of patients and society in the UK.

We believe that our dedication to innovation and our responsible approach will enable us to fulfil our mission to care for and provide high quality treatments for people with psoriasis.

EXHIBITOR

DIRECTORY



Pern Consumer Products Ltd

Stand number: 78

Quantum House, Hobson Industrial Estate, Burnopfield, County Durham, NE16 6EA

Tel: 01207 279 401

Contacts: Manager: Lisa Runkee/

External Business consultant: P Richardson Email: business_support@pern-consumer.co.uk

www.dermacool.co.uk

Pern Consumer products are featuring Dermacool – Menthol in Aqueous Cream BP, which is available in 0.5%, 1.0% & 2.0% strengths. Currently the range is available in 100g tubes; 450g pump dispensers and traditional 500g pots.

Pfizer Ltd

Stand Number: 63

Walton Oaks, Dorking Road, Walton-on-the-Hill, Tadworth, KT20 7NS

Tel: 07990 530081

Contact: Christine Ward

Email: christine.ward@pfizer.com

PASI educational tool for dermatology nurses/SpRs/ Consultants to help to develop skills in scoring psoriasis as part of their daily assessments.

Reckitt Benckiser UK

Stand Number: 59

Wellcroft House, Wellcroft Road, Slough, Berkshire, SL1 4AQ

Tel: 01753 217800

Email: medicalaffairs@reckittbenckiser.com

www.e45.com / www.rb.com

Reckitt Benckiser is a global company operating in health & personal care. The UK healthcare business has leading pharmaceutical products, including E45 Cream for the relief of eczema and dry skin conditions.

Roche Products Ltd

Stand Number: 12

Hexagon Place, 6 Falcon Way, Shire Park, Welwyn Garden City, Herts, Al10 9JU

Tel: 01707 366 000

Contacts: Bryan Richardson / Richard Eaton / Georgina Wardell Email: bryan.richardson@roche.com /

Richard.eaton@roche.com / Georgina.wardell@roche.com www.roche.co.uk

Roche is a globally leading biotech company with differentiated medicines in oncology, virology, inflammation, metabolism and CNS. Roche is the world leader in-vitro diagnostics and tissue based cancer diagnostics management. Roche's personalised healthcare strategy provides medicines and diagnostic which enables tangible improvements in the health, quality of life and survival of patients.

RSKPHARMA Ltd

Stand Number: 52

335 City Road, London, EC1V 1LI

Tel: 0203 291 1916

Contact: Dr Hamidreza Khalatbari Email: info@rskpharma.co.uk

www.rskpharma.co.uk

Dexem® Repair is a product line designed based on patented natural Bioactive complex to block harmful bacteria from attacking the irritated skin and targets the symptoms of eczema and other forms of irritated skin. This steroid-free product allows the irritated and eczematous skin to recover naturally without the constant stress from external factors. Dexem Repair has been dermatologically tested and suitable to use on children.

Schuco

Stand Number: 62

Axis 4, Rhodes Way, Watford, WD24 4YW

Tel: 020 8368 1642

Contact: James Watson

Email: james.watson@schuco.co.uk

www.schuco.co.uk

At Schuco you'll find tomorrow's skin technology, today!

Share our passion and expertise for innovative medical devices for dermatology and aesthetics including; imaging, detection and management of a variety of conditions from early detection of skin cancer to minor surgery and PRP (Platelet-Rich-Plasma).

SilDerm Ltd

Stand Number: 77

DaneMill, Broadhurst Lane, Congleton, Cheshire, CW12 1LA

Tel: 01260 271666

Contact: Aileen Cameron Email: aileen@silderm.om

www.silderm.com

The development of all SilDerm's products is based on sound scientific and medical research and all products have proven effectiveness. The recent addition of our scar gel and spray range leads the way in the management of scars and burns.

Special Interest Groups

Stand Number: 79

Willan House, 4 Fitzroy Square, London, W1T 5HQ Tel: 020 7391 6358

Email: conference@bad.org.uk

www.bad.org.uk

Spirit Healthcare

Stand Number: 56

Spirit House, Selbury Drive, Oadby, Leicester, LE2 5NG

Tel: 01162 865000

Contact: Angelina Thorne

Email: angelinat@spirit-healthcare.co.uk

www.spirit-healthcare.co.uk

Spirit Healthcare (STAND 56) is dedicated to helping you improve patient outcomes, expanding treatment choices and maximising productivity. We have launched a new range of Photodynamic Therapy products including Ameluz® 5-aminolaevulinic acid gel licensed ALA, the BF-RhodoLED static lamp, and Ambulight ambulatory light source. Spirit Healthcare: A brighter future in dermatology.

STD Pharmaceuticals

Stand Number: 49

Plough Lane, Hereford, HR4 0EL

Tel: 01432 373555

Contact: Julie Halford

Email: enquiries@stdpharm.co.uk

www.iontophoresis.info

STD are the suppliers of iontophoresis machines worldwide and provide machines for hospitals & patients throughout the UK.

Julie Halford from the Hyperhidrosis Support Group provides a one-off training session on Hyperhidrosis and the use of iontophoresis machines within the hospital environment. For further details please contact her at the Hyperhidrosis Support Group: info@hyperhidrosisuk.org

Stiefel, a GSK company

Stand Number: 15

GlaxoSmithKline, Stockley Park West, 1-3 Iron Bridge

Road, Uxbridge, UB11 1BT

Tel: 0208 990 9000 Contact: Geoff Holmes

Email: Geoff.d.holmes@stiefel.com

www.stiefel.com

Stiefel, a GSK company, is committed to advancing dermatology and skin science around the world in order to help people better achieve healthier skin. Stiefel's dedication to innovation, along with its focus on pharmaceutical, over-the-counter and aesthetic dermatology products, has established Stiefel as a world leader in the skin health industry.

To learn more about Stiefel, visit www.stiefel.com.

Typharm Ltd

Stand Number: 3

14D Wendover Road, Rackheath Industrial Estate,

Norwich, NR13 6LH Tel: 01603 722 480

Contact: Shauna Clark

Email: shaunaclark@typharm.com

www.typharm.com

Typharm Ltd is a UK company that specialises in marketing a range of pharmaceutical products for the treatment of various inflammatory and non-inflammatory skin conditions. Products include Haelan Tape, a moderately potent steroid, presented in an occlusive tape for the treatment of recalcitrant dermatoses including eczema, heel and finger fissuring as well as overgranulation.

Wiley

Stand Number: 24

1 Oldlands Way, Bognor Regis, West Sussex, PO22 9SA

Tel: 01243 843 294

Contact: Customer Service Department

Email: customer@wiley.com

www.wiley.com

Wiley is an international scientific, technical, medical and scholarly publisher with over 1,400 peer-reviewed journals and 1,500+ new books annually in print and online. Wiley publishes the BAD's journals, the British Journal of Dermatology and Clinical and Experimental Dermatology.

Wisepress Medical Bookshop

Stand Number: 23

25 High Path, Merton Abbey, London SW19 2JL Tel: 020 8715 1812

Contact: Nadia Ahmed

Email: bookshop@wisepress.com

www.wisepress.com

Wisepress.com, Europe's leading conference bookseller, has a complete range of relevant books and journals which can be purchased at the stand or, if you would rather not carry them, posted to you – Wisepress will deliver worldwide. We also have a comprehensive medical and scientific online bookshop with great offers.

World Congress on Cancers of the Skin 2014

Stand Number: 43

WCCS 2014, Conference & Event Services, 4 Fitzroy Square, London, W1T 5HQ Tel: 020 7391 6343

Email: wccs2014@bad.org.uk www.wccs2014.com

The World Congress on Cancers of the Skin (WCCS 2014) will allow physicians a unique opportunity to interact with a distinguished international faculty and learn about breakthrough discoveries in the prevention, diagnosis, and treatment of all types of skin cancer.

Calify Skin for

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Location Key

Arena and Convention

Atlantic Tower by Thistle

Base2stay Liverpool
 BridgeStreet Worldwide
 Crowne Plaza Liverpool

Crowne Plaza L
 City Centre
 Days Inn Hotel

6. Days Inn Hotel
7. Express by Holiday Inn Albert Dock
8. Hampton by Hilton

8. Hampton by Hilton
Liverpool City Centre

9. Hard Days Night Hotel

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Service of the servic

Novotel Liverpool Centre

Staybridge Suites

Delegate Bags

The Conference & Events Department is aiming to limit the impact the Annual Meeting has upon the environment. Conferences and exhibitions provide a huge amount of waste and this year we aim to continue to implement measures to improve this. Following feedback from previous meetings delegates will be provided with a generic delegate bag (as illustrated). This bag is made from recycled plastic bottle and has the BAD Logo on the side. We have made a decision

not to include a sponsor, date or annual meeting destination. This will enable you to reuse the bag for other annual meetings as well as other BAD meetings. We hope this will become your BAD 'Bag for Life'. If you have a bag from a previous annual meetings please bring it with you.

Evaluation Form

This year's evaluation form will be on-line and all attendees will be sent a link after the meeting.

Thank you in advance for taking the time to complete it, as it is an invaluable tool for us in organising future meetings.



Don't forget your bag!

CES MEETINGS CALENDAR

SEPTEMBER 2013

DermDoc

Venue: Willan House, London Date: 30th September

OCTOBER 2013

Clinical Dermatology Update Meeting for Staff and Associate Specialist Doctors

Venue: Radisson Blu Manchester Airport Hotel Date: 10th – 11th October

OCTOBER 2013

Teledermatology Forum

Venue: Willan House, London Date: 17th October

NOVEMBER 2013

SpR Training Event

Venue: Willan House, London Date: 7th – 8th November

NOVEMBER 2013

British Cosmetic Dermatology Group (BCDG) 8th Annual Meeting

Venue: Willan House, London Date: 9th November

The Annual UK Dermatology Course for Consultants

Venue: Hilton Paddington Hotel, London Date: 29th – 30th November



Join our Facebook Group: Conference & Event Services from the BAD



Follow us on Twitter @ BritDermEvents

For Further Details on any of these meetings please contact:

- Conference & Event Services; 4 Fitzroy Square London W1T 5HQ
- Email: conference@bad.org.uk
- Tel: 020 7391 6358







NOTES



XV WORLD CONGRESS ON CANCERS OF THE SKIN

3-6 SEPTEMBER 2014 EDINBURGH, SCOTLAND

