

BAD/DC Travel Fellowship – Summer 2016
25th EADV Congress, Vienna, Austria: 28 September-2 October 2016

Volha Shpadaruk

I am very grateful to the BAD for this chance to attend the 25th EADV from 28 September – 2 October 2016 in Vienna. I had two posters accepted for this meeting and I made arrangements with Professor Kittler to attend one of his clinics in AKH Vienna general hospital - one of the largest university teaching hospitals in Europe.

On Wednesday 28th September, I spent the morning with Professor Kittler and his team in his skin cancer clinic. I must say it was a wonderful experience and a pleasure meeting one of the leading specialists in the field of dermoscopy. His clinics have been set up for over 15 years, for which he is using MoleMAX to take and store images. Images are taken of suspicious moles every time a patient attends a clinic and compared over a follow up period. The follow up for a patient with a diagnosis of melanoma is 10 years irrespective of depth and stage. Referrals are accepted only from dermatologists across the country and Europe. There are clear and comprehensive guidelines in place. An appointment takes approximately 30 minutes, which involves full skin examination with dermoscopy of all moles, photography of monitored moles (MoleMAX) and excision of a lesion/lesions. All information is recorded on an electronic system called e-journal, which gives access to all investigations including blood tests and histology, previous clinic notes in dermatology and other specialties. There are no paper records in the clinics apart from a clinic list. Letters of appointment and clinic letters are generated on the system by the doctor making an entry in the e-notes. There is a medical photographer on stand by in the clinic with immediate availability. I was present at the biopsy where the doctor had to take only verbal consent and was able to proceed with the excision. All results are given at a face to face appointment in a few weeks' time.

This year's EADV consisted of 5 days (the scientific lecture was over a period of 5 days) and every day had a selection of 15 parallel tracks. The first day (Wednesday) was mainly for different society's meetings and updates.

Thursday morning began with skin diseases in general medicine. The highlight of this session was a talk on paraneoplastic dermatosis. During the break I managed to attend spotlight session talks on dermoscopy in alopecia and surgical pitfalls. Both lectures were of clinical use. In the afternoon I attended an advanced surgical workshop, where we were faced with tasks on solving closure of defects in different anatomical sites.

Friday morning I attended a workshop on laser therapy, where we were given desirable endpoints for each laser type and discussed side effects. This workshop was worth attending, as I understand clinical applications of different types of laser devices and their application. In the afternoon I took time to visit the exhibitors' area and also had a sightseeing walking tour in Vienna city centre.

On Saturday morning I attended an STI diagnosis and treatment workshop. It was interesting to learn from colleagues that it is compulsory by law for doctors on call in Germany and Austria to attend patients at night presenting to A&E with urethral discharge, perform a diagnostic swab and microscopy with methylene blue and commence treatment immediately. Also most European countries have dual

accreditation in Dermatology and STI (GUM). In the afternoon I listened to an update on vasculitis. This session was focused on the new classification Chapel hill consensus and nomenclature 2012 and diagnostic criteria. The consensus replaced the eponyms with the terminology based on pathophysiology. For example, Churg-Strauss vasculitis was replaced by eosinophilic granulomatosis with polyangiitis and Wegener's granulomatosis with granulomatosis with polyangiitis. There was a focus on polyarteritis nodosa and ANCA associated vasculitides, as clinically and histologically they can look very similar.

This year's EADV had a number of workshops, which were a huge success. All workshops were fully booked and of high quality. Experts in the field were sharing clinical knowledge and practical skills. It was a good refresher before the exam and new workshops were worth attending.