

Roger Harman African Travelling Fellowship 2018: Report from Moshi Sarah Hogan

The Roger Harman Travelling Fellowship allowed me to work on a collaborative online teaching project with the Regional Dermatology Training Centre (RDTC) in Moshi, Tanzania. Roger Harman was very passionate about teaching dermatology in Africa, where he spent much time during his career. The Roger Harman Travelling Fellowship has been set up in his memory to enable BAD members to visit Africa for the purpose of teaching.

The RDTC is a postgraduate school for dermatology trainees from across East and Central Africa. Since its inception in 1989 the centre has trained over 250 graduate students from over 15 countries to become consultant dermatologists. The RDTC also runs an Advanced Diploma in Dermato-venerology for community health workers. The students at the RDTC are regularly taught by their mentors on-site and have access to resources such as Bolognia and Rook. However, access to journal articles is limited, and teaching from external sub-specialist experts is generally restricted to the annual RDTC conference in January or ad-hoc visits and YouTube videos.



Earlier this year, Professor Vicky Jolliffe offered the RDTC her support to create an online learning platform based on the Queen Mary University London dermatology diploma model. Several hours of video formed the basis of the pilot, which included expert interviews supplemented by photos and text, a PBL session, case studies and didactic lectures. The online platform aims to deliver material otherwise inaccessible to the students, such as expert-opinion interviews and presentations, covering topics that are encountered on a regular basis by RDTC students but require further in-depth tuition, such as paediatric dermatology. We also created material on topics that are not usually taught at the RDTC and that are possibly new to many, such as psychodermatology, Mohs surgery and genodermatoses.

In October I travelled to the RDTC with Professor Jolliffe and Dr Karen Gibbon, who are both based at The Royal London Hospital in East London. The aim of our trip was to pilot the online platform and to gain feedback on its use, by watching and assessing the responses of the Dermatology trainees. We observed them staring intently at the videos, studiously taking notes. We even witnessed one of our videos going viral on campus within minutes, as our colleague Dr David Paige's reassuring baritone followed us on repeat around the hospital.

The trip also gave me the opportunity to shadow the trainees in clinic and on ward rounds, where I was able to gain an insight into their expectations and learning needs. I experienced first-hand how Dermatology residents often face complex and advanced presentations in this resource-limited setting. We met 4 year old twins who suffered from xeroderma pigmentosum and had only been using hoodies for sun protection. They had lost their sister to the disease and were themselves covered in SCCs. They were blind from their disease and mute with fear, waiting for yet another round of excisions. Unfortunately they had not had access to the RDTC centre for People With Albinism, which is an excellent resource, providing vulnerable patients from across Tanzania with sun cream that is made on site.

In theatre the doctors used methylated spirits to prepare the skin of a man with mixed connective tissue disease before taking a punch biopsy. The trainees knew which autoantibodies needed to be checked, but couldn't order them as the tests are unavailable. Despite the lack of resources the clinics run extremely efficiently and are organised and clean. The trainees work hard in the RDTC and their desire for knowledge is palpable. They want to improve their service and they remain optimistic that their access to resources will improve.

I'm pleased to report back that, as well as in the UK, Roger Harman's legacy lives on in Africa. During my stay I met a patient with dermatitis cruris pustulosa et atrophicans (DCPA), a type of folliculitis. Having never heard of it, I was keen to learn more. After asking around, an RDTC trainee informed me that Roger Harman was one of the first to describe it, and she proudly told me that she had just passed her dissertation and was now an expert on the condition.

I'd like to thank the British Association of Dermatologists for their help and support in allowing me to travel to the RDTC. I look forward to developing the programme in the future alongside those for whom it is intended.