

THE M O L E



THE AUSTRALASIAN COLLEGE
OF DERMATOLOGISTS

ISSUE 122 : SPRING 2019



Focus on
**RURAL
PRACTICE**
in Orange,
New South
Wales

+ An Annual Professional
Meeting of College?

Social media
guidance for best use

World Congress of
Dermatology wrap-up

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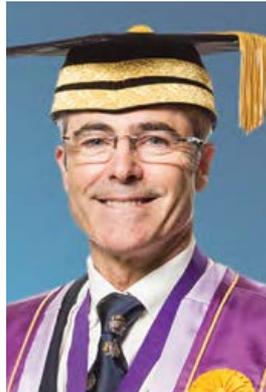


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President's report



A CALL TO ACTION

In my first hundred days, I have attended four significant events that require a call to action for College members and stakeholders, including government at all levels. Addressing deficiencies in supplying specialist dermatology services to rural, regional and remote communities, including Indigenous communities, requires not only immediate analysis, but more importantly, short and long term solutions.

The Council of Presidents of Medical Colleges (CPMC) meeting in Brisbane in August 2019 was an opportunity to discuss with other Colleges the problems involved, as well as hear from the Chief Medical Officer Professor Brendan Murphy, the head of the Medical Board of Australia and representatives from the Australian Health Practitioner Regulation Agency (AHPRA) and the Australian Medical Association (AMA). Prof Murphy outlined thoughts on different models, including training models, to address specialist supply to communities outside the city. Funding may be linked with this.

The previous day, a cultural safety training day was held by the Australian Indigenous Doctors Association (AIDA) for the CPMC attendees. AIDA also had their annual conference in Darwin in early October 2019, in which several College members and I were involved. Both of these events highlight the importance of providing culturally aware practice for all Aboriginal and Torres Strait Islander communities, both remote and metropolitan. Last month, in Orange, New South Wales, College held the 6th Rural Dermatology Meeting. This highly successful meeting was well attended by not only rural and regional dermatologists, but also other interested parties including members of the College executive. The conference outlined multiple issues and I have tasked the Rural and Regional Services Committee with collating opinions and solutions that we can enact to address the supply of services and workforce maldistribution. Thanks particularly to Dr Michelle McCrae, Dr Ian Hamann and the Rural and Regional Services Committee, as well as College staff, for providing an excellent forum.

These events all stood us in good stead for a face-to-face meeting in Canberra the subsequent day with the Minister for Regional Services, Hon Mark Coulton MP and Advisor to the Health Minister, Hon Greg Hunt MP. Tim Wills, Dr Haley Bennett and myself put forward our case for funding for College's teledermatology project – a pilot of five additional registrars to be attached to teledermatology positions, with subsequent evaluation. While being only one of the ways that services can be supplied remotely, if funded, the project can be enacted quickly and addresses both service delivery and workforce shortage. Solutions will be multiple and multilayered. We all need to give thought to these issues if we wish to be true to our strategic goals of being relevant in skin health and ensuring better outcomes for all patients regardless of postcode or cultural circumstances.

Congratulations to those recently successful in their exams. My plea is that you all consider some form of rural service, whether practicing rurally, or supplying outreach services, as you are the future representatives of College. With this comes responsibility to supplement and succeed your colleagues who have given so much time and effort to rural, regional and remote dermatology patients.

Associate Professor David Francis
President

CEO's report



**IN THIS EDITION OF
THE MOLE, I RAISE TWO
SPECIFIC ISSUES IN
ARTICLES AND SEEK YOUR
FEEDBACK.**

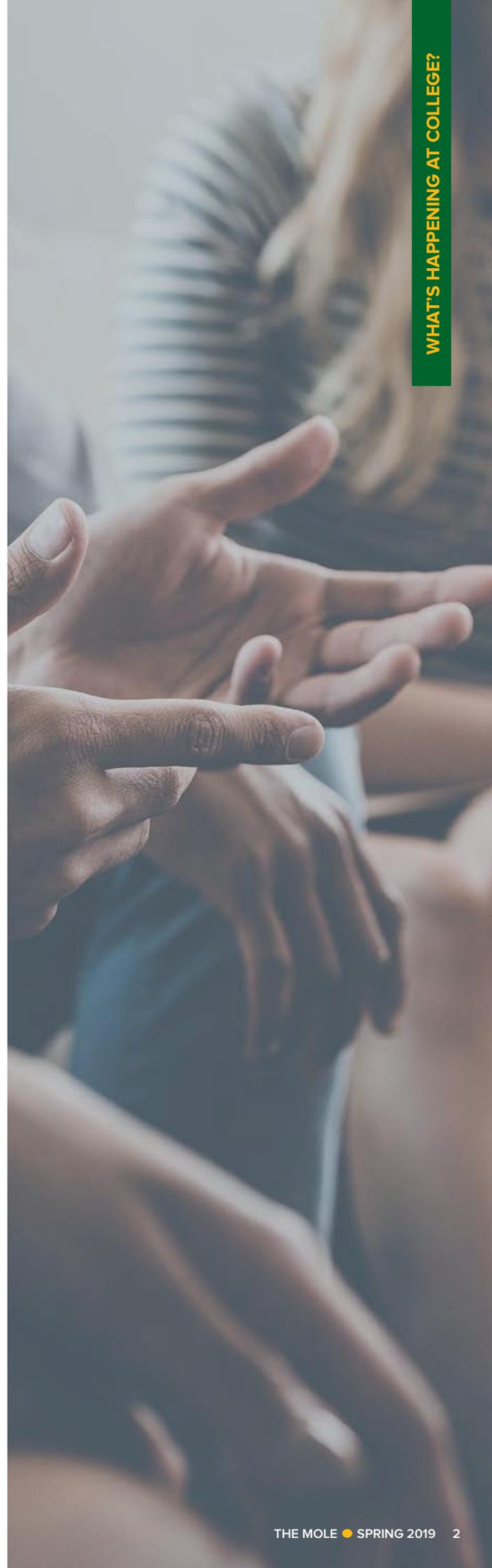
The first is the idea of College's place on the globe. College is 600 dermatologists with influence and great potential for greater influence beyond Australia, but there is no strategy for this. Later in this issue of *The Mole* is an article by Associate Professor Stephen Shumack concerning the recent World Congress of Dermatology. Following this are my thoughts on how to build on the work done by creating an international strategy.

The second is a call to spend more time as members together, by whatever means, discussing matters about the profession as a whole. For the profession to remain relevant, more time is needed on the profession itself. Whilst ever chronic skin conditions persist without cure and whilst skin cancer rates remain high, dermatologists individually will always be necessary and busy, but this does not imply the profession's future is protected. To maintain relevance, the profession must lead and cement its place in the changing medical and regulatory environment. Setting aside time to ensure awareness and ideas generation will help underpin a future of strength of the profession. Refer to the article: An Annual Professional Meeting of College?

Further to the above, congratulations to Dr Michelle McRae and Dr Ian Hamman and all the organisers of the College Rural Dermatology Meeting held recently in Orange, New South Wales. This was a stimulating three half days, with robust discussions about the rural future of the profession, some first class social events and some fascinating clinical insights and journeys.

Finally, congratulations to those trainees passing the exams in August 2019. You are now in a formative space where you can think about your future. I urge you to keep the profession as a whole in mind. Your individual choices can reinforce the status quo, or they can break the mould. As you know, there is a maldistribution of dermatologists manifesting in shortages and serious sustainability challenges for rural and regional Australia. There is maldistribution even within capital cities. Big regional centres also face challenges. As Orange shows, towns with a strong university presence, a growing cadre of specialists, quality schools (and wine) and redeveloped public and private hospital infrastructure, present as fabulous places for a future practice destination for you. Plus you can park out the front and be anywhere in five minutes. Go and see for yourselves.

Tim Wills
Chief Executive Officer



An Annual Professional Meeting of College?

Please note for your diaries in 2021 that the College Annual Scientific Meeting (ASM) is mixed within the International Congress of Dermatology to be held in Melbourne from 10 to 13 November 2021. This means there will be no ASM in May 2021, but do not scrub May 2021 dates just yet.

It is proposed to hold a meeting in May 2021, not an ASM, but a mixed clinical and professional meeting starting late Friday afternoon, all or part day Saturday and Sunday morning. An Annual General Meeting (AGM) would be held and attendance would be encouraged by electronic means if physical attendance is not possible.

There could be many specific and boutique clinical topics chosen. This could provide specific learning for trainees, which Fellows might find handy also. However, it is the idea that time be spent on some profession matters that this article seeks to address and canvas.

There are multiple topics that suggest setting aside time annually might be potentially beneficial. The aim is to get such a meeting on the calendar as a fixture. Whilst it would be in May in 2021, in other years a winter or summer date would be better.

The recent ASMs have held supervisor training, Medicare review updates and an ethics debate to name some, but the profession has some big topics to socialise across the membership including:

- General Practice (GP) education
- The Medical Board of Australia's Professional Performance Framework and the changes to Continuing Professional Development (CPD)
- Artificial intelligence.

Then there are many possible updates including: How College is financed, College strategy, marketing, advocacy initiatives and information technology updates: website and social media learning.

What about practice management, care pathways, changes to the training program and post Fellowship education?

How is this to be achieved?

One way is to amend the agenda when members meet. In the Adelaide ASM there will be 1.5 hours devoted to some of these, but integrating this within an ASM means cutting clinical content to make way for this as a focus. Is setting aside time elsewhere on the calendar preferable? Or are there other solutions?

If the profession is to adjust and move in the changing medical and regulatory environment, planned dialogue with members might be beneficial.

A second idea is that each Faculty hold a short face-to-face meeting. If so, the calendar would have Faculty meetings in addition to this, which adds burden to Faculty Committees. However, Faculties could choose what they want an update on from the Board or the College agenda. These could be filmed and used later as CPD for all members. This requires additional thought and organisation, but is this not where our strength lies in the member base? Is the College at the point where one ASM simply cannot do all this and such a change seems the correct next step?

However this gets done, this is a call to action. These ideas are under active consideration by the Board and the management of College. If this triggers your thoughts please take the time to communicate them to the Chief Executive Officer (CEO), President or Honorary Secretary of College. Do you support this? Under what conditions? How else might College address these challenges?

GOVERNANCE REPORT

In the last edition of *The Mole*, our Chief Executive Officer (CEO), Tim Wills wrote about some aspects of College governance, in particular the type of organisation that College is, the three main fiduciary duties of Directors and the Federal Acts that govern its activities. The important role of the state Faculties was also outlined.

Our Constitution is the central document in our governance. It states our objectives and the rules about how College should be governed, including how Directors are to be appointed and removed, and how meetings are to be conducted.

Obligations of Directors are embedded in the Corporations Act 2001 and although this document goes into depth for Directors of ASX 200 listed companies, it covers non-listed companies and is considered best practice for all organisations to adopt the principles and recommendations enshrined in this Act. To clarify for companies that are charities or not-for-profits, the Australian Charities and Not-for-profits Commission (ACNC) Act was passed in 2012. After review to determine the future of the Commission, it has recently been retained, and the ACNC Act also applies to College. Much work has been done by successive Presidents and Boards of College over the last few years to ensure our governance standards are appropriate and are aligned with these Acts.

Directors have both fiduciary duties and statutory duties. The former include the duty to act in good faith and a duty of care and diligence. The latter include the Corporations Act 2001 and nine other Acts affecting operations, for example Work Health and Safety, Competition and Consumer Protection.

In broad terms the Board has responsibility for overseeing both compliance and performance activities of College. This can be broken down into six major functions as per below:

-  Working with management to ensure appropriate setting of goals, strategies and performance targets to meet our members, other stakeholders and the community's expectations. In other words, the setting and overseeing of our Strategic Plan
-  Ensuring management has the appropriate resources to deliver our Strategic Plan in terms of finances, manpower, materials and management skills, as well as appointing and reviewing the CEO
-  Monitoring the performance of College against our Strategic Plan and targets
-  Ensuring we are compliant with relevant legal, regulatory and accounting requirements
-  Maintaining a risk register, which clearly outlines the risks that College is exposed to and ensure appropriate processes are in place to mitigate or manage those risks
-  Ensure accountability to our members and align the collective interests of Fellows, the Board, management and employees.

An appropriate breadth of experience, expertise and skill set in Board members is essential to discharge these duties optimally. With this in mind, the Nominations and Governance Committee has engaged an independent expert in governance for not-for-profit organisations to help recruit new Board members. The inclusion of two non-Fellow Directors with very different professional skills and experiences has added significant value to our organisation. The College is also seeking advice on its Constitution as part of its periodic review cycle.

Dr Clare Tait
President-Elect



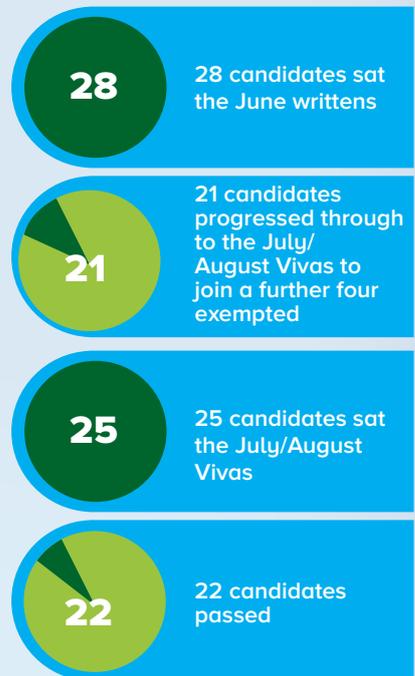
EDUCATION

ONE OF THE ALL-TIME GREAT RUNNING BACKS IN THE NATIONAL FOOTBALL LEAGUE (NFL), EMMITT SMITH, SAID “FOR ME, WINNING ISN’T SOMETHING THAT HAPPENS SUDDENLY ON THE FIELD WHEN THE WHISTLE BLOWS AND THE CROWDS ROAR. WINNING IS SOMETHING THAT BUILDS PHYSICALLY AND MENTALLY EVERY DAY THAT YOU TRAIN AND EVERY NIGHT THAT YOU DREAM.”

I am sure all members can relate to the time and effort that they have put in over many years to achieve the goal of Fellowship. While not all trainees passed this time, the efforts of all trainees, supervisors, mentors, family, friends and others should be noted as trainees strive towards the goal of specialist dermatologist. As somewhat of an outsider looking in, I am always amazed at the efforts you all put in to achieve your goal and I hope that College can support you in reaching that goal. So many people play a part in people achieving their Fellowship goals and all should be congratulated.

This year, the Fellowship examinations were held in Sydney, New South Wales. Thanks to the Skin Hospital for hosting this event and ensuring everything ran smoothly. Thanks also to the National Examinations Committee, led by Dr Catherine Drummond, for all their work over the year developing and running the exams; and to Dr Elizabeth Dawes-Higgs for arranging the exams. Thank you to Dr Tim Rutherford and Dr Karen Koh who have completed their last exam cycle with the Examinations Committee. On behalf of College, thanks to you both for your exceptional work on the committee and the many long hours you have contributed. They are succeeded by Dr Simon Lee and Dr Emma Haverhoek. This year, College ran its final examinations under the norm-referenced marking model. In 2020, College will move to a criteria-based model. This was trialled in parallel with the existing system in 2019 and College is confident of the transition to the new model in 2020. More information will be available shortly.

The results of the 2019 Exams were as follows:



Information on the exams can be found in the Chief Examiners report in the eLearning portal. Go to: Training Program>Examination information>Chief Examiners reports.

COLLEGE HAS ALSO BEEN BUSY IN OTHER EDUCATION MATTERS. BELOW IS A SUMMARY OF OTHER COURSES BEING OFFERED BY THE COLLEGE.



Mohs: Places are full for this year. Those interested in becoming Mohs surgeons should go to the continued learning and Continuing Professional Development (CPD) section of the website for more information.



Master of Dermatology: Enrolments are low at the moment, but this course is still available for Fellows. See the website for more details.



Master of Cosmetic Dermatology: This has been approved by the Tertiary Education Quality and Standards Agency (TEQSA) giving College the suite of Graduate Certificate and Graduate Diploma. The former is in its second semester of running.



General Practitioner (GP) training: College has run a number of workshops and online courses for GPs this year. It has worked closely with Cancer Council Victoria to train over 100 GPs in the area of dermoscopy.



Melanography: Launched in 2018, these continue to grow thanks to positive word of mouth. We have trained 148 nurses and health professionals to date and look forward to increasing uptake next year as with further marketing activities and the excellent reputation of the course spreads.

A final reminder for supervisors that the online supervisor training modules are available for you to complete in the eLearning portal. They are in category one and attract two points for each hour spent on them.

A reminder of the various online education courses that are available:

- **Workplace behaviour – a way forward.** This is a category three CPD module. All members should aim to complete this module
- **Supervisor training.** This category one module has three short online courses that all supervisors are encouraged to complete.

As usual if you have any education questions or comments you can contact me at the College at brett@dermcoll.edu.au or 02 8741 4199. If you are interested in being involved in education matters, whether it be mentoring, supervising or other course development/review, I'd love to hear from you.

Brett O'Neill
Director Education Services

2019 PRIZE WINNERS

Congratulations to the prize winners for 2019:

- GALDERMA ACD Travelling Fellow- Dr Andrew Lee (NSW)
- Founders' Medal for Procedural Dermatology- Dr Andrew Lee (NSW)
- Paver Medal for Medical Dermatology- Dr Andrew Lee (NSW)
- Kossard Award for Dermatopathology- Dr Jane Li (VIC)
- AAD Free Registration #1- Dr Jane Li (VIC)
- AAD Free Registration #2- Dr Alicia O'Connor (NSW).

2019 COLLEGE EXAMINATION RESULTS

Congratulations to the following 22 candidates who satisfied the National Examinations Committee in all phases and will be presented for Fellowship candidature in due course:

- Dr Alvand Amiri, NSW
- Dr Fetemeh Parisa Arianejad, NSW
- Dr Jessica Bale, NSW
- Dr Alvin Chia, NSW
- Dr Niranthari Chinniah, NSW
- Dr Adam Harris, NSW
- Dr Andrew Lee, NSW
- Dr Alicia O'Connor, NSW
- Dr Dana Slape, NSW
- Dr Lisa Byrom, QLD
- Dr Heba Jibreal, QLD
- Dr Sudipta Sinnya, QLD
- Dr Matthew Cho, SA
- Dr Georgina Harvey, SA
- Dr Janet Kim, SA
- Dr Eleni Anthony, VIC
- Dr Joshua Elakis, VIC
- Dr Jane Li, VIC
- Dr Aaron Robinson, VIC
- Dr Su-Lin Chan, WA
- Dr Louise O'Halloran, WA
- Dr Niamh O'Sullivan, WA.

The College Website, eLearning Portal and ACD Connect

The College Website, the e-Learning Portal and ACD Connect are all separate online systems. Despite looking similar in appearance, they all have different functions. All can be accessed with the same College username and password through the College website or directly through their URL addresses.

BELOW IS A SUMMARY OF EACH OF THE COLLEGE PLATFORMS. PLEASE CONTACT THE COLLEGE IF YOU HAVE ANY QUESTIONS.



The College Website

The College Website functions to provide access to information about College services to the public and members, as well as allow access to special areas for members.

Most pages of the website are accessible to anyone, however certain pages are partially or completely private and require users to log in to view them.

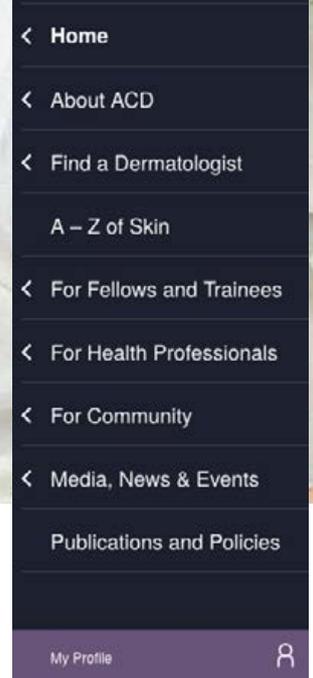
The front page of the College website is set up to target three key groups of users:

→ **For Fellows and Trainees:** Information on the Continuing Professional Development (CPD) Program and Courses such as the Master of Dermatology and Master of Cosmetic Dermatology, as well as Support and Welfare, Guidelines, Standards and Fact Sheets, Career Opportunities, FACD Logos and Guidelines (member only)

→ **For Health Professionals:** Information on how to become a dermatologist and College Programs and Courses, such as GP Skin Certificates and the Melanography Certificate

→ **For Community:** Information on understanding dermatology, Patient and Expert Stories

If you scroll down the home page, or click on the menu in the top left corner of the home page, there are some other areas as well.



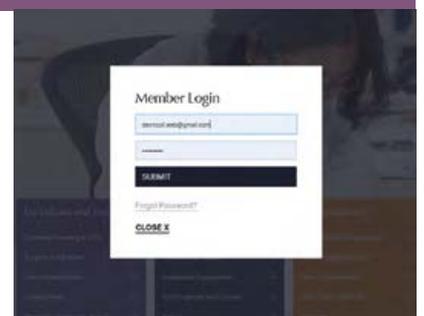
- **About ACD:** Includes information About ACD, College Committees, Research, Grants and Awards, Community Engagement, Outreach, Position Statements and College people such as College Advocates and College Staff.
- **Find a Dermatologist/Find a Mohs Specialist (If logged in, displays Member contact information, also known as Find a Colleague)**
- **A – Z of Skin:** Articles on various conditions and treatments
- **Media, News & Events:** College News, Upcoming and Past Event information and Media Releases.
- **Publications and Policies:** All College publications such as *The Mole* and Annual Reports as well as all policies relating to College Members and Education. Some publications require member log in access (e.g. regulations).

ACD Member Dashboard

Each time you log in to the website using your username and password, you will get access to your ACD Dashboard.

This includes access to:

- Your profile (please keep this updated)
- CPD Dashboard
- Your Financials
- Find a Colleague
- Online Journals
- ACD Connect
- E-Portal
- Online Training Portfolio (trainees only)





The following diagram highlights public versus private (login required) pages on the website

ACD Website www.dermcoll.edu.au

Public Areas	Member Area Username and Password required
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About ACD	College Committees and Taskforces	College Advocates	Find a Dermatologist <i>If logged in, displays Member contact information, also known as Find a Colleague</i>	Member Dashboard	CPD Dashboard & Submit Area	Online Training Portfolio (trainees)
College Engagement	Research Grants and Awards	Find a Mohs Specialist		Online Journals Access (AJD etc.)	FACD Logo's and Guidelines	ACD Connect
Policies and Publications	Guidelines, Standards and Fact Sheets	Position Statements	College News <i>If logged in, shows Member only College news</i>	E-Portal		
CPD Program	Master of Dermatology	Master of Cosmetic Dermatology		Career Opportunity Adverts	Support and Welfare Services	GP Skin Certificates and Courses
Understanding Dermatology	Patient and Expert Stories	Advocacy	Research and Clinical Trials	Patient Support	Media Release	
Upcoming Events	The Training Program	Specialist Pathway for Overseas Dermatologists				



The E-Learning Portal (E-Portal)

The E-Portal is another word for our learning management system and it's where members find course information. The College has created a number of e-Learning resources for ACD Fellows and Trainees.

These resources relate to CPD (e.g. Workplace behaviour module), the Training Program (e.g. handbook and curriculum), Fellow Education Programs (e.g. Mohs, Cosmetic Dermatology) and ASM (past presentations). The content in the E-Portal has been developed by Fellows of the College with assistance from staff within the College's education development team.

It includes access to

- Training Program Information and Forms
- College Conference Presentations
- CPD Modules
- Committee Support Modules
- Training Program materials and information such as Handbook and Portfolio Forms including SITAs
- Online Assessments and Exams
- Specialist Pathway for Overseas Dermatologists



E-Portal

Username and Password required
<https://elearning.dermcoll.edu.au>

Training Program Resources

Member Resources

Training Program Handbook & Curriculum	Training Portfolio Forms e.g SITA & ProDA	Training Program Forms e.g RPL & Overseas	College Meeting Presentations	CPD Online Modules & Forms	HoDs, DoTs & SoTs Training Resources & Forms	College Mentors Course
Training Online Modules	Webinar Recordings	Examination Information & Resources		Master of Dermatology	Master of Cosmetic Dermatology	Mohs Surgery Training Program

ACD Connect

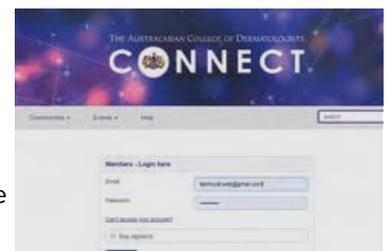
ACD Connect is an online forum platform, where members can view, post and discuss topics for any groups they are a part of e.g. a committee, a Faculty, or special interest group, such as Dermo.

One of the benefits of using ACD Connect, is that once you have set up your account, you don't need to log in into the members area to interact with ACD Connect. Messages posted to ACD Connect are sent directly to your email and you are able to reply straight from your inbox.

Each group you are a part of even has an email address

that users can use to post straight to the group without logging into Connect. Email addresses for each community can be found on the Community Home page in ACD Connect. *(Note: You must be part of the group in order to successfully post a message)*

More information on how to set up and use ACD Connect can be found on the ACD Connect site on the 'HELP' page.



ACD Connect

Username and Password required
<https://connect.dermcoll.edu.au/>

Trainee Communities

Faculty Communities

Committee Communities

Fellow Communities e.g Dermo

GOVERNMENT, POLICY AND ENGAGEMENT

GOVERNMENT ADVOCACY

Over the last few years, College has made steady progress in raising our profile in Canberra – responding to open consultations, preparing targeted submissions and building personal relationships with Department of Health representatives across all levels. These efforts have not only been fruitful from a policy perspective, with College increasingly being approached by government for expert advice and input into a range of health policy issues, but have also led us to secure our first face-to-face Ministerial meeting at Parliament House.

On 9 September 2019, Associate Professor David Francis, Tim Wills and I met with the Hon Mark Coulton MP, Minister for Regional Services, and a Senior Advisor of the Hon Greg Hunt MP, Minister for Health. On the agenda was College's pre-budget submission to the Federal Treasury – a proposal for a pilot program of registrar training supported by teledermatology to deliver services to regional catchment areas. This pilot addresses several of College's identified policy priorities, namely: workforce (addressing maldistribution and curbing workforce shortage); and service access (addressing inequitable healthcare access in the regions and optimising new models of delivery through telehealth).

The proposal was well received by the Minister. Having a farming background and representing Parkes – an electorate comprising 49% of NSW spanning almost 400,000 square kilometres across the state's north-west – the Minister was well attuned to the unmet need for dermatology care in his electorate. The Minister described his own experience with skin cancer that requires him to travel to Brisbane, Sydney or Canberra for consultations with specialist dermatologists. This personal experience meant that the value proposition of the pilot from the patient's perspective was easily demonstrated. The next step for College is to assure the government that this value translates to health system efficiencies and is a worthwhile long term investment.

Our meeting occurred at an opportune time. With the release in late August 2019 of the scoping framework underpinning the new National Medical Workforce Strategy, we are hopeful that our pilot will be seen to offer the Government a visible, tangible and easily implementable solution to help address rural health inequities.

Our work here is certainly not done and we will persist to remain on the radar throughout the budget process over the coming months. At this point of the year, the various government portfolios develop their budget proposals and then vie amongst themselves in early 2020 before the final Federal Budget is released in May.

Regardless of the outcome, we are pleased that we have made traction in our advocacy efforts and have taken the first vital step in making connections and building relationships at the Ministerial level.

Haley Bennett
Deputy Chief Executive Officer



TIM WILLS, DR HALEY BENNETT AND ASSOCIATE PROFESSOR DAVID FRANCIS AT PARLIAMENT HOUSE

EXPERT ADVISORY COMMITTEE

The Expert Advisory Committee (EAC) was established in late 2017. Since their inception, the committee has been integral in providing insight and strategic advice to College and to the Board on a range of topical clinical and policy issues.

The EAC has been tasked with:

- ◆ Providing input into and oversight of the development of planned outputs, such as position statements, guidelines, evidence summaries, government submissions or policy briefs, that align with College's proactive policy and advocacy initiatives as approved by the Board of Directors
- ◆ Providing rapid and thoughtful strategic advice and input into reactive initiatives, such as issues management strategies; or unplanned outputs, such as solicited government submissions relating to dermatological issues of government, community or College interest
- ◆ Identifying, prioritising and providing strategic and pre-emptive guidance around emerging topical issues in clinical practice, clinical standards, health policy, legislation or other matters that have the potential to impact College, its members, their patients or the community; or whereby College can act proactively to exert influence and effect positive change.

Members of the committee:

Associate Professor Stephen Shumack (Chair)
Professor H Peter Soyer
Professor Rosemary Nixon
Dr Kurt Gebauer
Professor Alan Cooper
Dr Phil Bekhor
Dr Warren Weightman.

The EAC has proved to be a highly responsive and invaluable source of guidance for College. Under the leadership of A/Prof Shumack, the committee has contributed to the development of numerous government submissions and provided insight into a range of clinical and stakeholder engagement issues.

ADVOCACY CORNER



INTERNATIONAL PIONEER AWARD

CONGRATULATIONS TO PROFESSOR DEDEE MURRELL WHO HAS WON THE INTERNATIONAL PIONEER AWARD FOR 2019.



PROFESSOR DEDEE MURRELL

The Women's Dermatologic Society (WDS) International Pioneer Award recognises an individual who has enhanced the role of women in dermatology, has served as a mentor or role model for women, has achieved accomplishments that have impacted the specialty of dermatology or medicine and is recognised as a pioneer or trailblazer for women's issues or women in dermatology.

This award is given every four years to an individual who has made a difference for women in dermatology at a global level at the WDS International Forum, during the World Congress of Dermatology.

PAST RECIPIENTS

- 2019 – Professor Dedee Murrell, MA, BMBCh, FAAD, MD, FRCP, FACD (Australia)
- 2015 – Dr Zenab El-Gothamy, MD (Egypt) and Dr Amanda Oakley, MBChB, FRACP (New Zealand)
- 2011 – Dr Evangeline Handog, MD (Philippines)
- 2007 – Dr Marcia Ramos-e-Silva, MD, PhD (Brazil)
- 2003 – Dr Kazue Ohara, MD, PhD (Japan).



PROFESSOR MARYANN DANESHAPHZOCH, DR BRUHILDA BARDI, PROFESSOR WILMA BERGFELD, PROFESSOR DEDEE MURRELL, PROFESSOR BRANKA MARINOVIC, DR ZRINKA BUKVIC MOKOS AND PROFESSOR KATERINA PATSATSI IN MILAN, ITALY



COLLEGE MARKETING AND COMMUNICATIONS – HOW FAR WE HAVE COME

In the College’s 2015 to 2019 Strategic Plan, it was identified that raising the profile of College, of dermatologists and what they do, was a key priority. This represented a new way of thinking for College, acknowledging that we exist in a crowded space and there is some public confusion over what differentiates dermatologists. As such, College employed a Marketing and Communications Specialist in late 2016 to manage marketing, media, communications and events.

Prior to this, the College was primarily involved with reactive media and industry communications with no direct marketing to the community.

Having this in-house expertise has resulted in a range of achievements over the last three years, including:

MARKETING

- Marketing and communications strategy
- Three marketing campaigns
- Education marketing plans
- Creation of College media kit for advertising
- Recreation of branding policy
- Recreation of College style guide
- Evaluation and discontinuation of printed brochures
- Revitalisation of the Public Affairs Committee
- Formation of the Sponsorship Taskforce.

MEDIA

- Media strategy
- Implementation of College media monitoring system
- Media release and case study writing
- Responding to all media enquiries.

COMMUNICATIONS

- Social media strategy
- Formation of the advocate program
- Three annual reports
- Redesign and quarterly delivery of *The Mole*
- Reformatting and weekly delivery of the weekly newsletter
- Creation and daily management of College social media channels- LinkedIn, Twitter and Facebook
- Annual National Skin Cancer Action Week activities with Cancer Council
- Regular liaison with Skin Hospital and Skin & Cancer Foundation Inc.

EVENTS

- World Congress of Dermatology bid project management
- International Congress of Dermatology event management
- Three Annual Scientific Meetings
- Two Rural Dermatology Meetings
- Scientific Meeting Steering Committee secretariat.

COLLEGE MARKETING CAMPAIGNS

2017 MARKETING CAMPAIGN

The 2017 campaign was a targeted marketing campaign encompassing the key areas of melanoma, acne, psoriasis and eczema with a focus on online and social media content.

Key results of the campaign included:

- 1,218,857 PEOPLE REACHED ACROSS WHOLE CAMPAIGN
- 69% INCREASE IN COLLEGE WEBSITE TRAFFIC
- 188,000 PEOPLE REACHED THROUGH TARGETED ENEWSLETTERS
- 20% INCREASE IN FACEBOOK FOLLOWERS
- 43,379 PEOPLE REACHED ON TWITTER THROUGH HUFFPOST ADVERTISEMENT.

The 2017 campaign started to build awareness with the community, established agreed key messages to position dermatologists and raised the public profile of College in skin health. It also tested target audiences and tactics, established a look and feel for College materials and created a suite of videos and flyers that could be reused.

As the dialogue on sun protection is being led by the Cancer Council, we picked early detection of melanoma to lead the community dialogue on as part of the 2018 marketing campaign.

2018 MARKETING CAMPAIGN

The 2018 campaign was a national media relations push focussing on men over 50 who are high risk of melanoma.

It achieved a total reach of 9,887,807 in 480 media outlets through:



The 2018 media campaign reached 10 times as many people as the 2017 online and social media campaign. The survey was considered the most newsworthy aspect of the campaign and the Video News Release was key to securing television coverage. Securing dermatologists and patients in each state was also important to obtain greater coverage and the key messages document kept all spokespeople on message.

In 2019, we planned to expand public awareness into other areas of skin health. Due to the success of the 2018 media relations campaign, a media relations campaign was pursued.

2019 MARKETING CAMPAIGN – PART ONE

Part one of the 2019 marketing campaign focussed on cosmetic dermatology.

Dermatologists as experts and patient profiles were offered to media outlets along with six angles for cosmetic dermatology topics.

Results were a total of 18,584,303 media impressions from:



2019 MARKETING CAMPAIGN – PART TWO

An opinion piece on melanoma and artificial intelligence was written by two dermatologists for the Medical Journal of Australia Insight.

The story was launched to national consumer media along with experts and patient profiles and Facebook posts.

Results were a total of 16,895,363 impressions from:



2019 MARKETING CAMPAIGN – PART THREE

Part three of the 2019 marketing campaign focussed on rural dermatology and launched at the time of the College Rural Dermatology Meeting in September 2019.

National consumer media- both print and online- were targeted with expert and patient profiles, and Facebook posts.

Results were a total of 1,601,773 impressions from:



FACD LOGO

As a means of recognising the dedication and professional service of its Fellows and their commitment to excellence in dermatology, College has a Fellow of the Australasian College of Dermatologists (FACD) logo for use by its Fellows.



The FACD logo can be used on office stationery, websites, presentation slides, stationery, business cards and email signatures. It can be downloaded in the members section of the College website along with the FACD logo guidelines.

If you have any questions, please contact College.

Roshan Lewis
Marketing and Communications Specialist



SOCIAL MEDIA

WHY IS SOCIAL MEDIA A VITAL COMPONENT FOR ORGANISATIONS LIKE OURS?

Social media is a large part of everybody's life. It is how people communicate, look for events, gather information and find weather. It is an integral part of any organisation, from large corporations to small businesses and community-centred organisations focused on reaching out to consumers, raising awareness and engaging with the public about their services. In our case, members of College are the service providers on the ground, but the College itself plays a key role in not only education and training, but also promoting and advocating for dermatologists and their patients.

College has a relatively smaller membership compared with many other member organisations. We have 550 practicing Fellows, 130 trainees and 43 associate members. However, given the size of membership, there are more than 960,000 people in Australia- over 4% of the population- who suffer from a long term condition of the skin. Skin disorders also rank sixth of all disease groups for non-fatal disease burden¹. The psychosocial aspect of skin conditions is huge and in many cases goes largely unnoticed. As such, there are vast numbers of patients, carers and members of the community that we can reach through social media and assist them with expert evidence-based information and advice.

WHY IS HAVING A SOCIAL MEDIA STRATEGY IMPORTANT?

As a peak national body, College's vision is to have highest standard of skin health and dermatological care to be available and accessible to all patients and communities. This is where social media can play an important role. In order to achieve our mission and vision, we can leverage social media to increase our profile as the leaders in championing and promoting skin health to all Australians. We want to upscale our reach to wider communities including those in rural and remote areas and strengthen our relationship with diverse communities and the government.

Social networks are one of the fastest growing industries in the world and with a projected 25% annual growth over the next five years. It is vital to invest our efforts in social media as a core communication strategy for College. However, having a social media presence without an appropriate strategy is ill-advised. Thus, we have developed a strategic approach to tailored content development and demographic targeting across our various platforms, each of which have unique characteristics and purpose.



PATIENT SUPPORT GROUP SERIES

In the winter Mole, we featured our April and May 2019 patient support group series from the Eczema Association Australia and Melanoma Patients Australia. Since May 2019, we have had three more features in our monthly support group series.

The Patient Support Group series is an exciting opportunity to emphasise that for patients, dermatology is more than just skin. It is an opportunity for College and the support groups to come together to raise awareness of particular skin conditions and the support people can seek. For June, July and August 2019, College featured Allergy and Anaphylaxis Australia in June, Eczema Support Australia in July and Albinism Fellowship Australia in August. We profiled each organisation, their upcoming awareness days, principal services they provide and patient stories. The posts had a collective reach of more than 5,000 people.



As of September 2019 College has an online presence on five social media platforms.



FACEBOOK – 1700+ FOLLOWERS



TWITTER – 670+ FOLLOWERS



LINKEDIN – 350+ FOLLOWERS



INSTAGRAM – 150 FOLLOWERS



YOUTUBE – 24 VIDEOS.

OUR SOCIAL MEDIA STRATEGY

Most of College’s social media accounts were created in 2015 and were relatively underused up until 2016. As this was our initial foray into social media, these accounts were used on an ad hoc basis until 2018.

In 2019, College launched its first comprehensive social media strategy on Facebook and Twitter.

The strategy focused on six key themes, including: organisational updates, education, Aboriginal and Torres Strait Islander health, community, research and clinical trials and health news items. The initial short-term goal was to increase the frequency of posts to reach out to more users and establish online connections with stakeholders with mutual interests, such as consumers, community, health forums and governments.

Having this strategy in place helped to increase the frequency of Facebook posts from two to three posts a month to as many as 80 per month. For Twitter, the number of tweets have gone up from as little as four to as many as 40 per month. Between May and August 2019, College has seen the most amount of followers and likes. This period of activity covered the 2023 World Congress of Dermatology bid, the Annual Scientific Meeting (ASM), patient support group monthly series, College’s Medical Journal of Australia (MJA) Insight article, awareness days (eg NAIDOC Week, Close the Gap and Eczema Awareness Day) and various health news items. College also actively re-tweets and shares activities and initiatives of members on Twitter and Facebook.

During the 2019 ASM, members and advocates expressed a keen interest in College having an Instagram account which led to College launching its own account in September 2019.



The challenges with social media include:

- **Reputation:** The more you post, the more you are exposed to criticism. People who have had less positive experiences may be more inclined to share their views
- **Endorsement:** Without careful vigilance, there is a risk of inadvertently being seen to be affiliated with products or organisations
- **Breaching of guidelines:** With the increase use of social media, College and members are also potentially at the risk of breaching Australian Health Practitioner Regulation Agency (AHPRA) or Therapeutic Goods Administration (TGA) guidelines
- **Slow death of social media:** Another obvious challenge is the ever-changing digital trend. One medium that is popular today might not be so popular tomorrow
- **Content generation and regular monitoring:** Maintaining a social media presence is resource and time intensive.

The opportunities of social media are:

- **Raising the profile with consumers, public and government:** If utilised properly, social media has immense benefits to help College with policy and advocacy initiatives
- **Upscale reach:** It can make both College and dermatologists champions for skin, hair and nail health for all Australians, reaching people who may be socially or geographically isolated
- **Networking on a global scale:** Social media allows for connecting and collaborating with the international community to share resources and information
- **Medical graduates:** It can be useful to promote dermatology as a profession to attract more medical graduates
- **Members to be the content providers:** College members are using various platforms in their work to educate their patients and share knowledge on various skin conditions. This could be a good opportunity for members to collaborate more closely with the College and act in the capacity of content providers for various social media platforms.



1 Australian Institute of Health and Welfare. 2019. *Australian Burden of Disease Study: impact and causes of illness and death in Australia 2015*. Australian Burden of Disease series no. 19. Cat. no. BOD 22. Canberra: AIHW

Mariam Zahid
Engagement Officer

SOCIAL MEDIA POLICY

The Medical Board of Australia has a social media policy available on its website.

This policy was developed jointly by the National Boards to help practitioners understand their obligations when using social media.

It applies to all registered health practitioners in Australia.

Before you post...are you in breach?

Your advertising obligations and requirements as a medical practitioner

Advertising, through social media, is a useful tool to support patients to make informed decisions. College has increasingly engaged with social media as another form of promoting who we are and what we do, as we've

seen in the above article. Many of you are active users on social media and know how great it is for engaging with patients and the community to advertise your services.

However, there may be circumstances where you're not sure what you can and can't post on social media. There are many grey areas and a seemingly simple post may put you at risk of being in breach of the national law and other regulatory instruments. Ensuring you are compliant and not in breach of your advertising requirements as medical practitioners is critical.

We've heard from some of our members who want greater clarity on what you can and can't post on social media. College recently put together a fact sheet to help clarify this, so you can get the most out of your social media. You can access this through the College website.

Before you post, consider the following:

Posting type	Your obligations and requirements
Advertising a regulated health service	You must ensure your advertising is not: false, misleading or deceptive; offering a gift or discount, unless terms and conditions are stated; use testimonials; create an unreasonable expectation; and directly or indirectly encourage unnecessary use of a regulated health service. Key resource: Section 133 <i>Health Practitioner Regulation National Law</i>
Promoting products and making recommendations	It is an offense to advertise to the public about therapeutic goods containing statements referring to goods, substances or preparations, included in Schedules 3 (pharmacist only medicine), 4 (prescription only medicine) or 8 (controlled drug). Key resource: <i>TGA Australian Regulatory Guidelines for Advertising Therapeutic Goods</i>
Advertising medical devices	Promoting the types of medical devices used in your practice must be done within the requirements under the Therapeutic Goods Act 1989 and the Therapeutic Goods Advertising Code 2015. Key resource: <i>TGA Advertising health services with medical devices: information for health professionals and health practitioners</i>
Before and after photos	Should be used with caution. There is a significant potential for this type of information to be misleading or deceptive and to inappropriately convey to the public high expectations of a successful outcome. Patient informed consent must be granted before using such photos on social media and other platforms. Key resource: <i>AHPRA Guidelines for Advertising Regulated Health Services</i>
Testimonials: patients or clients posting comments on your social media page and/or posts	You cannot use testimonials in your social media to advertise regulated health services you provide. Testimonials must be removed from your advertisement. Key resource: Section 133 <i>Health Practitioner Regulation National Law</i>
Using words such as 'cure', 'can help/improve/treat' or 'effectively treats', 'safe', and/or 'effective'	These words could be misleading if the health service or product advertised is not based on acceptable evidence. More information is available on the AHPRA website. Key resource: <i>AHPRA What health practitioners and healthcare providers need to know about advertising</i>
Using the specialist dermatology title	Specialist dermatologist is a protected title under the National Law. Only Fellows of the College can use this title. It is misleading to consumers for other practitioners to insinuate they hold specialist registration or an endorsement when they do not. Key resource: <i>AHPRA Titles – getting it right when advertising your health service.</i>

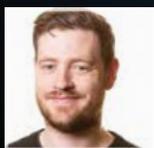
SPOTLIGHT ON RESEARCH

CHARACTERISATION OF WORLD'S FIRST MOUSE MODEL FOR DOMINANT DYSTROPHIC EPIDERMOLYSIS BULLOSA GETS BOOST FROM COLLEGE GRANT



ASSOCIATE PROFESSOR
JOHANNES KERN

In 2017, College Fellows, Associate Professor Johannes Kern and Professor George Varigos, together with co-applicants Dr Ken Pang and Dr Blake Smith, received a College Scientific Research Award for 'In depth characterisation of four newly generated Dominant Dystrophic Epidermolysis Bullosa (DDEB) mouse models – invaluable resource for the delineation of pathology and development of treatment strategies for a common epidermolysis bullosa subtype.'



DR BLAKE SMITH



DR KEN PANG

The Royal Melbourne Hospital runs a dedicated epidermolysis bullosa (EB) clinic with College Fellows Dr Susan Robertson, Dr Vanessa Morgan and a dedicated EB nurse and is actively involved in clinical trials in EB, with A/Prof Kern being the global lead investigator in the largest EB trial to date, the ongoing Amryt Oleogel S10 EASE study.



PROFESSOR GEORGE
VARIGOS

The project characterising the first DDEB mouse model harvests the full translational research potential of the Parkville biomedical precinct.

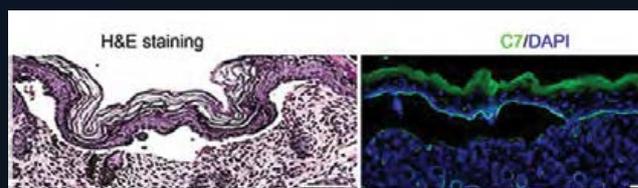
DDEB is one of the most common EB subtypes, characterised by subepidermal blistering. Previously, no mouse model for this EB subtype existed. Using innovative CRISPR genome editing technology, the team generated new mouse strains that model DDEB. For the characterisation of the mouse model, the team also collaborated with one of the leading EB research groups worldwide including Professor Leena Bruckner-Tuderman, Professor Cristina Has and Dr Alexander Nyström from the German EB Centre, University of Freiburg.

The College grant directly supported anatomical and physiological characterisation of the new DDEB

mice by light and electron microscopy; evaluation of COL7A1 expression at both the ribonucleic acid and protein level; assessment of collagen VII localization by immunofluorescence; and using fibroblast and keratinocyte lines as source material, undertake collagen VII helix stability assays to determine the physiological effects of each COL7A1 mutation at the protein level. These results are compared directly with clinical presentation and results from tissue and cells of DDEB patients to warrant that the mice closely recapitulate the human phenotype.

The availability of the first DDEB mouse models will now enable development and testing of targeted therapies for this specific EB subtype in a standardised model and also further molecular investigations into the pathophysiology and treatment of EB related pain and itch- two of the biggest unmet needs for EB patients.

A/Prof Kern grew up in Würzburg, Germany and studied medicine at the University of Freiburg and the University Joseph Fourier, Grenoble in France. In his experimental MD thesis with Prof Bruckner-Tuderman, he worked on mutation detection and study of clinical, biochemical and molecular findings in recessive dystrophic EB. A/Prof Kern gained his PhD in Biology at the Spemann Graduate School of Biology and Medicine at the University of Freiburg on 'Genetic skin fragility: molecular mechanisms and novel treatment strategies.' He trained in dermatology at the University Freiburg Medical Centre and passed the European board examination in 2012 (FEBDV). A/Prof Kern also trained in dermatopathology with German and European board certification (ICDP-UEMS). After relocating to Australia, he became a Fellow of College in 2016 and joined the team of the Royal Melbourne Hospital, where he is currently the Head of Clinical Research, as well as an Associate Professor at the University of Melbourne.



DDEB IS CHARACTERISED BY DETACHMENT OF THE EPIDERMIS FROM THE DERMIS (LEFT PANEL). BLISTERS ARISE IN THE UPPERMOST DERMIS WITH COLLAGEN VII STAINING TYPICALLY PRESENT (IN CONTRAST TO SEVERE GENERALISED RECESSIVE DYSTROPHIC EB) AT THE BLISTER ROOF (MODIFIED FROM NYSTRÖM ET AL PLOS ONE 2013).

Further reading:

Oleogel-S10 Phase 3 study "EASE" for epidermolysis bullosa: study design and rationale. Kern JS, Schwieger-Briel A, Löwe S, Sumeray M, Davis C, Martinez AE. *Trials*. 2019 Jun 11;20(1):350. doi: 10.1186/s13063-019-3362-z.

Rat model for dominant dystrophic epidermolysis bullosa: glycine substitution reduces collagen VII stability and shows gene-dosage effect. Nyström A, Buttgereit J, Bader M, Schmidt T, Ozcelik C, Hausser I, Bruckner-Tuderman L, Kern JS. *PLoS One*. 2013 May 23;8(5):e64243. doi: 10.1371/journal.pone.0064243. Print 2013.

Cell- and protein-based therapy approaches for epidermolysis bullosa. Nyström A, Bruckner-Tuderman L, Kern JS. *Methods Mol Biol*. 2013;961:425-40. doi: 10.1007/978-1-62703-227-8_29.

Artificial intelligence – are we there yet?



What is AI?

Does your mind immediately jump to an episode of Black Mirror? Or Red Dwarf? A future where the more sinister elements of technology abounds? Well, don't. We're a long way off from the future of technology depicted in popular culture. When we talk about Artificial

Intelligence (AI) in dermatology, we're talking about narrow AI- a type of AI performing a specific function; rather than general AI, which is comparable to human intelligence.

Dermatology is ripe for disruption from AI and machine learning. As a profession relying on visual and tactile diagnosis, AI is set to change how dermatologists diagnose, triage and manage patients. We're in a prime position to take advantage of AI developments to enhance services and ensure better outcomes for patients.

How will it impact the profession?

Dermatology requires expertise and knowledge in pattern-based recognition for diagnostic acuity. Advances in imaging technology, coupled with AI's ability to interrogate images down to the pixel level, places dermatology in an advantageous position to leverage the benefits. Optimising AI in this setting may also help to address potential pitfalls, including improper training data, uninterpretable output and legal challenges.² Ensuring ongoing education and training in understanding and applying AI to better inform practice will be important as advances in AI are made.

Current examples of AI in dermatology are primarily focused on the use of AI to detect skin lesions using images.^{3,4,5} A study recently published in The Lancet Oncology compared the accuracy of dermatologists versus machine-learning algorithms for pigmented skin lesion classification. The study found "state of the art machine-learning classifiers outperformed human experts in the diagnosis of pigmented skin lesions."⁶ The study acknowledged the important role machine learning could have in clinical practice.

In the clinical setting, decision-making is vastly more complex than what has been modelled in AI studies to date. The efficacy of AI in a clinical setting is yet to be tested.

How have we contributed to ensuring we're able to harness AI in the future?

There have been two reports released for public consultation so far this year on AI. Both initiated by the Australian Government to identify global opportunities and guide future investment in AI. College has responded to both reports:

Data61 CSIRO: Artificial Intelligence: Australia's Ethics Framework

Data61 CSIRO: AI: Australia's Ethics Framework

This report released by Data61 CSIRO put forward a proposed ethical framework for AI in Australia. The paper proposed eight core principles, supported by nine tools

to support an ethical approach to AI. College provided its in-principle support for the framework, and emphasised the importance of a system wide response across the healthcare sector. We advocated for a healthcare specific framework on how best to manage privacy protection and other medical ethical considerations with AI. In addition, education and training would help address automation bias and encourage practitioners to actively think and involve themselves with AI derived decisions

Standards Australia: Developing Standards for Artificial Intelligence: Hearing Australia's Voice

Standards Australia was tasked by the Australian Government with developing a roadmap on standard setting for the use of AI in Australia. College is supportive of the development of a national standard to contribute to the advancement of AI applications in Australia. We called on Standards Australia to develop a healthcare specific standard to address applications of AI in health more thoroughly. We also suggested the importance of standards being agile and responsive to the technological and practical advancements, whilst ensuring standards do not unduly disturb the natural evolution and application of new AI processes as they develop.

AI in dermatology: the key challenges

While, AI in dermatology offers so much, there remains a number of issues to be considered in its application:

- Training data needs to be correct and include a diversity of patient characteristics and skin disease types. AI is only able to perform as strongly as the data from which it learned. Granularity of data provided, regarding data labelling, needs to be considered in order to improve the accuracy and usefulness of the outputs
- Algorithm output needs to be interpretable. The rationale for this concern is that if AI systems are to be adapted as clinical support tools, clinicians will want a way to verify the reasoning that goes into an algorithm's decision. AI should be able to support and explain its diagnostic decision making
- Current trials of AI have not been tested in a clinical setting. Dermatologists performed better than AI when given clinical context regarding the patient
- AI is capable of undertaking super human tasks, however human-patient interaction should always be preserved when necessary. Diagnosis is not always straightforward in dermatology and therefore requires additional examination and testing. Often a macro or holistic view is needed, involving examination of multiple areas of the body, particularly for inflammatory conditions
- Addressing liability and risks associated with the commercialisation of AI is required. Any consumer facing diagnostic applications using AI must ensure the ongoing engagement of the medical profession and consumer protection. There are issues already emerging with the use of smartphone applications used for self-diagnosis for skin cancer, leading to inaccurate diagnosis.⁷ Appropriate safeguards and consumer protection mechanisms need to be established in order to mitigate adverse impacts due to the commercialisation of AI.

Implementing AI in dermatology will require demonstrating its validity in the eyes of regulatory bodies at an international, federal and state level.

If AI is classified as a medical device it would require thorough assessment and compliance with the current, and future, federal and state rules and regulations. It is worthwhile noting that, the Therapeutic Goods Administration (TGA) recently raised these issues more broadly in their consultation on software as a medical device. AI would potentially need to be captured within this or a similar regulatory framework.

An eye to the future: will you be ready?

College is supportive of embracing an AI future. We recognise the key role AI and other digital technologies are playing now and in the future. Ensuring you are ready and able to incorporate AI into your practices and model of care is part of our digital agenda.

We will continue to actively participate in the developments of AI through government and industry engagement.

If you're interested in giving back to College and want to help shape our responses as we move towards an AI future, get in touch and speak to us on how to get involved through our e-Health Committee.

Data61 CSIRO: AI: Australia's Ethics Framework

Eight core principles:

1. Generates net-benefits
2. Do no harm
3. Regulatory and legal compliance
4. Privacy protection
5. Fairness
6. Transparency and explainability
7. Contestability
8. Accountability.

Nine tools to support an ethical approach to AI:

1. Impact assessments
2. Review processes
3. Risk assessments
4. Best practice guidelines
5. Education, training and standards
6. Business and academic collaboration in Australia
7. Monitoring AI
8. Recourse mechanisms
9. Consultation.

1 Black Mirror is a British science fiction anthology. It explores modern society, with a particular focus on the unanticipated consequences of new technologies.

2 Schlessinger, DL., Chhor, G., Gevaert, O., Swetter, SM., Ko, J., Novoa, RA. *Artificial Intelligence and dermatology: opportunities, challenges and future directions*. *Semin Cutan Med Surg*. 2019 Mar 1; 38(1): E31 – 37

3 Haenssle HA, Fink C, Schneiderbauer R et al. *Man against machine: diagnostic performance of a deep learning convolutional neural network for dermoscopic melanoma recognition in comparison to 58 dermatologists*. *Ann Oncol* 2018; 29(8): 1836–1842

4 Esteva, A., Kuprel, B., Novoa, RA., Ko, J., Swetter, SM., Blau, HM., Thrun, S. *Dermatologist-level classification of skin cancer with deep neural networks*. *Nature*. 2017 Feb 2; 542(7639): 115 – 118

5 Lev-Tov, H. Turning skin "check" into checkmate. *Sci Transl Med*. 2017 Mar 1; 9(379)

6 Tschandl, P., et al 2019. *Comparison of the accuracy of human readers versus machine-learning algorithms for pigmented skin lesion classification: an open, web-based, international, diagnostic study*. *The Lancet Oncology*, June 2019; 20(7): 938-947

7 Cancer Council Australia. Position Statement: Screening and early detection of skin cancer. https://wiki.cancer.org.au/policy/Position_statement_-_Screening_and_early_detection_of_skin_cancer#_ga=2.198432303.1499668949.1558677140-746103801.1535090114

DERMATOLOGY CLINICAL TRIALS NETWORK

On 19 May, 2019, a meeting was held at the Melbourne Exhibition and Convention Centre, seeking input from the dermatology community regarding the development of a Clinical Trial Network (CTN) that can lead a national research agenda for dermatology.

The meeting was conducted with the support of the Australian Clinical Trials Alliance (ACTA)- the national peak body supporting and representing clinical trial networks that conduct and support investigator-initiated clinical trials within the Australian health system.

Clinical trial networks consist of collaborative groups of practising clinician researchers that unite to identify important clinical questions and design large multicentre clinical trials to answer them. The trials may be conducted in collaboration with industry, but the majority of networks tend to have a strong focus on investigator-initiated trials that can provide unbiased, high quality scientific evidence.

There are over 60 individual clinical trial networks, clinical trial coordinating centres and clinical quality registries in Australia that are part of ACTA, covering a broad range of disease groups and clinical disciplines that represent the majority of investigator initiated clinical research in Australia. There is currently no dermatology clinical trial network.

Establishing a Dermatology Clinical Trial Network will serve to foster collaboration and exchange of ideas, facilitate national clinical trial research participation and provide the necessary infrastructure to support multi-centre dermatology research. A cooperative approach will support the establishment of a research agenda that is investigating critical questions related to current practice that are likely to lead to improved health outcomes or address important gaps in knowledge.

Building capacity through collaboration will also strengthen the establishment of key partnerships and funding opportunities.

It is recognised that one of the key benefits of clinical trial networks is the more rapid translation of trial results into practice due to the widespread involvement of practicing clinicians. Involvement in a trial increases the likelihood to adopt new outcomes and recommendations.

Collective peer review and endorsement of trial proposals through the network will strengthen scientific rigour, help to avoid duplication of effort and support adequate resources and engagement for successful trial conduct.

Attendees at both meetings held to date have expressed strong interest and support in forming a network that facilitates the aims of the group. The initiative is also seen as a pathway to raising the academic standing of dermatology.

The interim steering committee is currently planning to meet in the next couple of months to formalise the structure and establishment of the new network. An update regarding progress and opportunities for involvement will be communicated as the network structure evolves.

In the interim, please direct any enquiries to Christine Zahren on czahren@skincancer.asn.au.

INTERNATIONAL OUTREACH



DINNER IN JAFFA WITH HON ROGER COOK MLA, DEPUTY PREMIER AND HEALTH MINISTER.



TECHNION - ISRAEL INSTITUTE OF TECHNOLOGY - HAIFA

WESTERN AUSTRALIA HEALTH INNOVATION, RESEARCH AND TECHNOLOGY DELEGATION TO ISRAEL



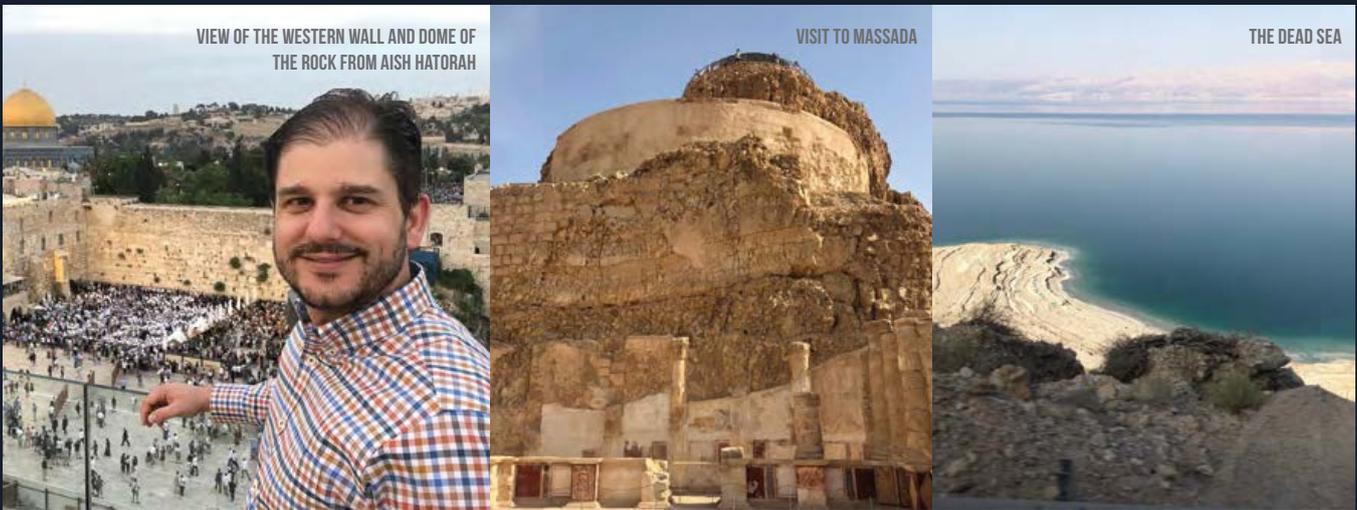
In May/June 2019, I had the privilege of attending a unique Western Australia (WA) health innovation, research and technology delegation to Israel.

The delegation of 40 was led by the Deputy Premier and Health Minister, Hon Roger Cook MLA and attended by the Chief Scientist of WA, Professor Peter Klinken AC, the Director General of WA Health, Dr David Russell-Weisz and many key WA public and private sector key health figures.

The state government has provisioned \$126.6 million over the next four years through the Future Health Research and Innovation Fund. The purpose of the mission was to bring home lessons and insights into medical and life science research and its commercialisation from Israel. Israel is at the forefront of this industry, with over 1,450 companies employing 85,000 people and attracting over \$US1.2b per annum in venture capital. I would like to share what I have learnt on this trip with you.

Israel has achieved phenomenal success in medical and life science research and its commercialisation. The government, through the Israel Innovation Authority, led by the Chief Scientist of Israel, nurtures start-up companies through privatised incubator and accelerator programs from seed to early stage, minimising risk for investors and increasing the likelihood of success. It has become known as the Start-Up Nation, with over 600 new start-up companies per year and ranking fifth in the world for patents filed per capita and first for patents granted by number.

I believe dermatology, as with many world endeavours, will see significant disruption in the next decade. Most of us perceive life as linear in its progression, however with our unlimited computational power and big data- exponential change is nearby and inevitable. Traditional medical research, potentially taking decades or more to translate into clinical practice, is being challenged by innovative entrepreneurial disruptors, many without medical qualifications, who are currently following an exponential path to commercialisation. In order to live amongst disruption, we need to adapt our cultural biases. We need to value ambitious ideas, which are so easily labelled naïve and challenge ourselves to think differently.



Artificial Intelligence (AI) will be the most likely cause of disruption facing dermatology and the world in the next decade. There is a lot of hype about artificial intelligence and it is important to be able to navigate this. Currently, the AI that exists in our world is programmed to perform single tasks using a specific data-set. This narrow AI has no consciousness, sentience or emotion, unlike humans. It can often appear more sophisticated than it actually is. In fact it is performing a task within a pre-determined and pre-defined range. However, the benefits of this AI are significant and not to be underestimated with profound ability to increase human efficiency, productivity and quality of life. In dermatology, it will assist us in making data-driven diagnostic and therapeutic decisions and improve access, making care delivery quicker, better and safer. The concept of artificial generalised or super intelligence is very different to what we know or have experienced. It is human-like AI that is equivalent or superior to human intelligence, being able to incorporate human consciousness, sentience and emotion. Achieving generalised or super AI is vastly more difficult and far further on the horizon.

Artificial intelligence has enjoyed waves and survived winters over the past 70 years. Waves and winters refer to periods of increased funding and interest or cuts in funding and criticism, respectively. We are currently in the spring of the third wave of AI. Overpromising and underdelivering led to the first AI winter. Lack of computing power, data and efficient algorithms led to the second AI winter. Currently, in the spring of the third wave, we have unlimited cloud computing power, big data and more efficient algorithms. We have more widespread acceptance of human and machine interaction, we live with smart phones and smart assistants and AI is more embedded, less intrusive and less of a novelty in our daily lives. Funding of AI is currently diverse, coming from governments, universities, venture capital and angel investors. It may be that this current wave of AI has the greatest chance yet of avoiding another winter.

Cultural embracement of exponential growth, technology and innovation is very important for continued progress- particularly in healthcare. Without this, implementing change or adapting to a new world, will be an even greater challenge. Incremental change at the core and disruptive change at the edges of healthcare organisations is probably the soundest approach to this difficult task of cultural change. It

is important to address the fear of disruption e.g. human replacement. Disruption often creates a new set of problems, which require retraining rather than replacement, but some jobs will be replaced. I don't believe the dermatologist is one of these jobs, but rather how we work will very likely change. I believe exponential growth in dermatology will be seen in the field of teler dermatology and precision dermatology, in particular genomics, phenomics and non-invasive decision support tools/devices, supported by curated data and efficient machine and deep learning algorithms, which will improve access to dermatology services, improve diagnostics and therapeutics and prioritise our services.

In Israel, we visited many healthcare AI companies. Two AI companies in particular provide decision support tools for radiologists, which prioritise life threatening cases and expedite patient care. The AI software is Food and Drug Administration (FDA) cleared and has CE Mark for intracranial haemorrhage and other indications. This AI decision support tool will allow the radiologist working in a hospital or remotely to have his or her workflow prioritised by urgency, for example, the person with a head scan showing an intra-cranial haemorrhage will be triaged to the top of his or her workflow by the AI. This does not replace the radiologist, but rather prioritises his or her workflow and improves patient outcomes.

A key learning from this trip was the importance and challenge of cultural change in the digital medical revolution. I also gained a further appreciation of the current state of our deceptive linear growth in healthcare technology and AI, which is quickly approaching disruption.

This was an inspiring and aspirational delegation, offering insights into the future of healthcare and priorities of the government and private sector in WA. I was very fortunate to engage with a wonderful network of colleagues within WA government, health and in Israel. The mission further confirmed the strong focus of the WA Health Sustainability Report and Future Fund on cultural change, innovation and technology.

I thank the College and WA Faculty for sponsoring this trip.

Dr Tony Caccetta
Chair, WA Faculty

FLORANCE BEQUEST REPORT

I was fortunate to spend the American summer of 2019 in Miami, Florida, learning more about hair disorders from Professor Antonella Tosti and Dr Mariya Miteva. Although I spent most of my time in the University of Miami Hospital, with patients who are mostly privately insured, I also participated in some clinics at the Jackson Memorial Hospital and a free clinic at Camillus House. This breadth of exposure allowed me not only to see many different presentations of alopecia, but also recognise the challenges of working within the American health system with a very different funding structure to ours.

Female and male pattern hair loss was a frequently treated condition. In addition to typical therapies I had been exposed to during my training, I learnt how other therapies including Platelet-Rich-Plasma (PRP), fractionated laser with Minoxidil solution and low-level light therapy, were occasionally used adjuvants. The method for injecting platelet-rich plasma differed between practitioners. Some used nerve blocks to completely numb the scalp, followed by widespread injection of PRP with microneedling, while others injected without anaesthetic more superficially into the scalp skin. I learnt more about the controversies of prescribing finasteride and there was much discussion regarding whether the post-finasteride syndrome is a true entity.

Given the diversity in the population of Miami, I saw many presentations of central centrifugal cicatricial alopecia. I also learnt more about traditional African methods of styling hair and the effect these have on presentations of hair disorders.

I saw a number of presentations of the more severe, rapidly progressive form of alopecia areata incognita. I also saw a number of rare presentations of hair disease, including patients with keratosis follicularis spinulosa decalvans, hypohidrotic ectodermal dysplasia and uncombable hair syndrome.

I spent some additional time co-writing a book chapter on 'Allergies to Hair Cosmetics' with Professor Antonella Tosti. She proved an excellent mentor for my interest in alopecias.

The dermatology department of the University of Miami is very impressive. They have clinical meetings every week where patients with good clinical signs or difficult-to-manage disease are brought in person to be examined by the faculty and residents. Their signs and management are then discussed in a resident-lead case conference. After this, weekly Grand Rounds are given, often by visiting academic Faculty members from other American states.

Living in Miami itself was quite distinct from the rest of mainland America. Two-thirds of the population speak Spanish as their first language and the South American influence can be strongly felt. You won't have to look far to find a top quality Cuban sandwich or good tacos. My family was fortunate to have narrowly missed the furore surrounding Hurricane Dorian, but we certainly experienced a high level of humidity during our time in Miami. On the weekends, we enjoyed the art deco inspired sights of South Beach and the beautiful sunsets of Brickell Bay where we were staying. I was fortunate to have been supported by the F.C. Florance Bequest to travel and stay in Miami.

Dr Annabel Stevenson



NZDSI executive changes

The New Zealand Dermatological Society Inc (NZDSI) has had a change of executive.



The new executive includes:



President – Dr Louise Reiche

Dr Louise Reiche studied at Otago Medical School in Dunedin, New Zealand (NZ) for her preclinical years then moved to Wellington Clinical School of Medicine to complete the clinical component of her medical school training, subsequent house surgeon and medical registrar training, culminating in her Fellowship for the Royal Australasian College of Physicians (FRACP). Her advanced training in dermatology began in Wellington, followed by Waikato Hospital, Hamilton and then High Wycombe and Amersham, with training links to both Oxford and St John's in London, England.

On returning to NZ, Dr Reiche first worked part time for a year as a general physician at Palmerston North Hospital, then for 10 years as a dermatologist. Throughout that time and since, she has worked as general dermatologist in private practice.

Working within an integrated family healthcare setting, Dr Reiche provides practitioner specialist advice and additional teaching and mentoring. She has served on the executive in several roles, for the NZDSI.

Dr Reiche has a long history of working with the NZ Cancer Society, is a clinical advisor to Melanoma NZ, Chairperson for the NZ Dermatology Research Trust and is contracted to the Medical Council for Vocational Practice Assessments.



Secretary – Dr Giri Raj

Dr Giri Raj graduated from Auckland University in 2001. He trained in Middlemore and Auckland Hospital in NZ from 2001 to 2008 and completed his FRACP in 2007.

Dr Raj completed his dermatology training in Middlemore and Greenlane Hospital in NZ and an overseas Fellowship for dermatology in Liverpool and St Johns in London and Glasgow, United Kingdom.

He began private practice in 2013. Dr Raj also worked for Taranaki Base Hospital from 2013 to 2016 and Wellington Base Hospital in 2017, both in NZ.

He currently runs a private dermatology practice in New Plymouth and Wellington, NZ.



Treasurer – Dr David Hepburn

Dr David Hepburn trained in Christchurch and Auckland, NZ and spent eighteen months in Denver, Colorado, America, finishing his training in paediatric dermatology and dermatopathology. He returned to NZ in 1993 and has since then been in private practice in Christchurch.

Dr Hepburn also has a consultant clinic at Oamaru Hospital, NZ and until recently, has done private clinics in Timaru, NZ.

INTERNATIONAL CONFERENCES

THE INTERNATIONAL LEAGUE OF DERMATOLOGICAL SOCIETIES (ILDS) WORLD CONGRESS OF DERMATOLOGY, 10-15 JUNE 2019, MILAN, ITALY

Over 50 Australian dermatologists attended the World Congress of Dermatology in Milan in June 2019. This is an event which occurs every four years and Milan attracted over 16,500 delegates- the biggest attendance at a world congress to date.

There was a wide range of educational sessions throughout the day, including a number of industry sponsored sessions at lunchtime and in the early evening.

The plenary sessions occurred in the middle of the day and were on wide ranging subjects from the development of an understanding of Huntington's chorea, to points associated with the various generational issues to do with intergenerational interactions. Scientific highlights of the meeting include an update on treatment of atopic dermatitis, psoriasis and the use of JAK inhibitors in a host of dermatological conditions from alopecia areata to vitiligo.

The venue was well organised, although there were a number of rooms which were overflowing with popular sessions. The venue was easily accessible from all areas of Milan by the train, tram, bus, Ubers or taxis.

One of the highlights of the World Congress of Dermatology was the Friday night gala dinner, which was held in the Sforzesco

Castle. This was modelled along the lines of Leonardo da Vinci's party celebrating the marriage of the Grand Duke of Milan's daughter some 500 years ago. There was a hot air balloon with dancers underneath floating around the conference venue and blow up horses dancing to an enraptured audience during this gala dinner.

Many Australian dermatologists took advantage of the congress being in Milan to spend some time in Italy or Europe pre or post event. The weather was great with the average temperature being in the high 20s or low 30s.

There was brisk activity around the bidding process for the next World Congress of Dermatology, with Sydney being one of the bidding cities. Sydney put up a good fight and was eliminated in the third round. Thanks go to the Bid President, Professor H Peter Soyer and all the Vice Presidents and bid ambassadors from Australia who worked so hard on the bid. Singapore won the right to hold the 2023 World Congress of Dermatology in the final and fourth round of voting. Congratulations to Professor Roy Chan and Professor Yen Yoo Lim, the President and Secretary General of the Singapore bid respectively, for their great effort in getting across the line.

Associate Professor Stephen Shumack
Bid General Secretary





What does College take out of its investment of time and resources in bidding to host of a World Congress of Dermatology? Over three years of work, Australia has been noticed, thanks to the work of Professor Peter Soyer and Associate Professor Stephen Shumack. College is on the map. It would make sense to build on the work undertaken, the contacts and supporters made, the knowledge gained and the appreciation others now have for our College's worth in global dermatology.

With the next Congress coming to Singapore in 2023, it seems unlikely College would bid again for eight to 12 years, as the Congress will rotate next through Europe and likely the Americas before returning to Asia.

College needs a deliberative strategy during this eight-year period so that it has a larger profile by the time it bids again. The international prominence College felt after the 1997 Sydney Congress when Professor Robin Marks became an International League of Dermatological Societies (ILDS) Board member and through Professor Alan Cooper, led to notable changes in College, but this influence was falling away by the time bidding commenced.

In Milan, A/Prof Shumack was elected as an ILDS Board Member for the next eight years. Staying in touch with the ILDS as it shapes the global skin health agenda is of fundamental importance to knowing how to position ourselves- an important first step has been achieved.

College would benefit by deriving an international strategy. What does College value? What is College hoping to achieve? Should College look to its Asia-Pacific neighbours first and foremost? To achieve exactly what there? What about further afield, such as Africa? Where College has input present is due to the personal choices, values and motivations of members. What if College sat down to plan where it would like member input where it felt there was mutual gain, benefiting College and the destination? Such a strategy might comprise:

- More focus and support to our International Dermatology Outreach Committee (IDOC) and their initiatives
- Supporting the Fiji School to become a Pacific regional training hub and seek ILDS support for Fiji through its international fund

- Encouraging Asia-Australia exchanges to build regional alliances through leader visits and Annual Scientific Meeting (ASM) exchanges to grow international relationships
- Internationalising the ASM by seeking more international attendees
- Seeking to join or create alliances that give benefit to research, education and future bid prospects. There is a strong link with Japan and Singapore, but what about China, India, Malaysia and Indonesia?
- Ensuring College's Constitution enables such international initiatives to be part of College work
- Seeking to expand the training program through international education. Why exactly, other than for historical reasons, does College send trainees to Singapore and England? Where else might be new horizons?
- Through a College research strategy, form links globally in special interest areas. Have an open mind to create more Honorary Members
- Connecting deliberately with international societies, either by attending, seeking to be on their Boards, or by other means e.g. International Society of Dermatology (ISD), International Fund for Dermatology (IFD) and GLODERM- a new body formed in Washington DC at the 2019 American Academy of Dermatology (AAD).

WHAT ELSE MIGHT BE IN SUCH A STRATEGY?

Governance, by way of some form of steering committee, to ensure accountability and reporting to the Board would be required. If you have an interest in this area, to oversee its strategy in College, or you simply wish to make suggestions or observations, please contact the Chief Executive Officer (CEO).



STATE FACULTY REPORTS

NEW SOUTH WALES FACULTY REPORT

It has been a very busy period for the New South Wales (NSW) Faculty. We are grateful to The Skin Hospital for hosting the clinical exams in August 2019. The provision of staff and closing the facility to all clinical activity on a weekday is a massive contribution. The NSW Faculty congratulates all successful candidates nationwide. Commiserations to unsuccessful candidates. Thank you to all bulldogs, College staff, registrars and Fellows who helped examine, organise and run the day. The examination is a complex organisational process. While there are too many individuals to list, special thanks must go to Dr Liz Dawes-Higgs, Dr Jillian Wells, Dr Catherine Drummond, Dr Simon Lee, Dr Kerry Crotty and Associate Professor Patricia Lowe; and from College Brett O'Neill, Tony Moore and Jacqui Sciancalepore; for their roles in the exams. Most importantly, we thank all patients for their generosity and kindness in participating in the process.

The College Rural Dermatology Meeting in Orange has just concluded. It was fantastic to see so many members who made the effort to come from interstate. A lot of interesting ideas and opinions have been put forward to tackle the issue of rural workforce shortages, which College will take on board. Thank you in particular to Dr Ian Hamann and Dr Michelle McRae and from College, Roshan Lewis for organising the meeting, along with Dr Christie Beveridge, Dr Frances Tefany, Dr Lachlan Warren, Dr Nicholas Stewart, Dr Rachael Anforth, Dr Rebecca Saunderson and Associate Professor Saxon Smith.

The NSW Faculty would also like to acknowledge the retirement of Professor Stephen Lee. Many members would know of Prof Lee's many roles in College over the years, including Director and Honorary Secretary. He has taught multiple generations of dermatologists and served the NSW, Australian and broader international community with distinction throughout his career. We wish him all the best in retirement and for the future.

Dr Keng Chen
Chair, NSW Faculty

VICTORIAN FACULTY REPORT

The Victorian (VIC) Faculty acknowledges, with sorrow, the passing of Dr Brian Entwisle who was one of the founding members of the Australasian College of Dermatologists - he was a mentor, colleague and friend to many and will be sadly missed.

We also congratulate the members of the VIC dermatology class of 2019, who passed their Fellowship exams: Dr Joshua Elakis, Dr Jane Li, Dr Eleni Anthony and Dr Aaron Robinson. Special mention to Dr Jane Li for being awarded the Kossard Award for Dermatopathology.

Our main focus over the winter, apart from Melbourne's ongoing love affair with Australian Football League (AFL) and property, has been registrar selection and a focus on achieving more registrar positions. Many VIC Faculty members have been actively involved in College's selection process and I thank all those who have given up considerable time and energy. We believe it is a fair process and all efforts made by us will lead to the best-credentialed candidates awarded positions. We are excited and relieved to have a new registrar position at Monash Medical Centre in Clayton to support our current team. It required a multipronged assault by many members across a variety of platforms to get it across the line. We hope that more registrar positions in areas of need will become available with targeted applications by VIC Faculty. Growth corridors in Melbourne in the west, south-east and north, along with many country areas, have workforce shortages both in the public and private sector. We are attempting to address this by working towards a telehealth service based at a city hospital, having a Specialist Training Position (STP) based in Healesville and working to maintain our outreach visits to multiple VIC regional towns.

Occupational health and safety of our registrars remains a high priority and to that end we thank Dr Catherine Scarff, who has worked tirelessly in her pilot position for College in trainee welfare and engagement. This role finished after 18 months at the end of July 2019 and had a broad beneficial impact on all VIC trainees and the VIC Faculty itself. We wish Dr Scarff well as she completes her PhD. We look forward to the appointment

of two new welfare officers who will continue this important role.

We are also looking forward to our annual VIC Faculty dinner at Cumulus's Arc One Gallery, for the opportunity to share a feast and maintain collegiality in our ever-growing VIC fraternity.

Dr Paul Curnow
Chair, VIC Faculty

QUEENSLAND FACULTY REPORT

It is with great pleasure that the Queensland (QLD) Faculty congratulates Dr Lisa Byrom, Dr Heba Jibreal and Dr Sudipta Sinnya on their success in the recent Fellowship examinations. We wish them long and successful careers in dermatology. Thank you to both of the QLD State Examiners, Dr Catherine Faulkner and Dr Karen Behne, for all their work, as well as to all the other QLD Fellows involved in the examination process.

The QLD Faculty would like to warmly welcome dermatologist, Dr Leona Yip, to our ranks. Dr Yip has recently moved to Brisbane from Melbourne and brings with her a wealth of experience that we look forward to her sharing with us.

The QLD Faculty's most recent clinical meeting was held at the Queensland Institute of Dermatology (QID) on Saturday 27 July 2019. This was well attended by members and as always, there was a great mix of complicated cases. It was great to see QID's new premises in South Brisbane. This was followed by the QLD Faculty's third general business meeting for the year. Our next clinical and general business meetings will be held at The Royal Brisbane and Women's Hospital (RBWH).

The Alan Cooper Epiderm Lecture was held on Friday 9 August 2019 at the Translational Research Institute Auditorium at the Princess Alexander Hospital. Professor Georgia Long and Professor Peter Scolyer, Co-Medical Directors of the Melanoma Institute of Australia, gave a fantastic lecture entitled 'Zero deaths from melanoma.' They were a dynamic duo and outlined succinctly the progress that has been made in treatment of advanced melanoma.

Thank you to all the QLD Fellows involved in the selection process for training positions in 2020. Dr Sam Conias and Dr Godfrey Wagner were involved in the CV weekend in Sydney, New South Wales (NSW) and the CV shortlisting, along with Dr Dougal Coates, Dr Karen Behne and I. Dr Wagner, Dr Coates and I also attended the interview weekend in Sydney. The outcome of this process has been finalised, along with offers of trainee placements for 2020.

In other trainee news, the QLD Faculty would like to welcome Dr Neela Biswas back from leave, as well as Dr Kendall Sharpe who has returned to QLD after six months of training in NSW. Both trainees will be based at the RBWH for six months.

The weekend of 6 to 8 September 2019 was a busy one for the QLD Faculty. Numerous members were fortunate to attend the Rural Dermatology Meeting in Orange, NSW. The academic and social programs were thoroughly enjoyed by those who attended. The Australasian Dermatopathology Society (ADS) Meeting was held at Rydges Hotel, Brisbane on the same dates. It was great to see the QLD Faculty also well represented at this event. The ADS paid tribute to Professor David Weedon, in view of his retirement, to recognise the enormous contribution he has made to dermatopathology, not only in Australia, but also worldwide. It was lovely to hear Dr Ivan Robertson and Adjunct Associate Professor Greg Siller pay tribute to Prof Weedon, both as a colleague and as a friend. I hadn't realised how many of Prof Weedon's rules of life I had inadvertently incorporated into my life. The tribute was followed by the David Weedon Lecture, which will from now on be an annual event delivered by a renowned Australian dermatopathologist. The inaugural lecture was given by Dr Ben Wood, who spoke on 'The Molecular Basis of Melanocytic Neoplasia- Present Knowledge and Future Directions.'

The third McCallum Founder's Lecture was held at the Translational Research Institute Auditorium on Thursday 12 September. Associate Professor Christopher McCormack spoke on 'Cutaneous Lymphomas- how a niche field became so broad.' It was very interesting to hear how this field has progressed. Thank you to Professor Richard McCallum and family and the University of Queensland for their contributions this event. Events such as these are important in continuing to foster the collegial spirit so prized by our foundation members.

Dr Amanda Godbolt
Chair, QLD Faculty



PROFESSOR ELIZABETH EAKIN, PROFESSOR H PETER SOYER, DR LEONA YIP, ASSOCIATE PROFESSOR CHRISTOPHER MCCORMACK, ASSOCIATE PROFESSOR DAVID FRANCIS AND DR AMANDA GODBOLT

SOUTH AUSTRALIAN FACULTY REPORT

A huge congratulations to all three candidates from South Australia (SA), Dr Matthew Cho, Dr Georgina Harvey and Dr Janet Kim, who were successful in passing the Fellowship examinations. Best wishes for your dermatological careers ahead of you.

Dr Brittany Wong has commenced her six month rotation to the new training position for the SA Faculty in Darwin, Northern Territory (NT), supervised primarily by Dr Dev Tilakaratne. From next year, this is a full year rotation. It's a huge step for the NT to have a training position, which is great for the community and a unique experience for the registrar.

Dr Lynne Gordon has retired after a long and fruitful career and will be missed by many of us as she has been an integral part of the SA dermatological community, having supervised and taught so many of us in the state. Her retirement party, shared by the SA Faculty members, was graciously hosted at Associate Professor Gillian Marshman's home and we enjoyed speeches from them and Dr Chloe Lim, who was also excellent.

Associate Professor Gillian Marshman has assisted in the following information regarding Dr Lynne Gordon: This winter we farewelled Dr Lynne Gordon from the Flinders dermatology unit as she heads off to new adventures in retirement. Dr Gordon has been an integral part of dermatology at Flinders Hospital and the Repatriation Hospital for close to 30 years. She has brought a unique style to dermatology service, provision, teaching and development of the unit in her roles as senior clinician, a mentor to trainees and Head of Unit over the years. There are only one or two SA members who have not been trained by Dr Gordon at some point and profited by her enormous wealth of knowledge, especially in the area of contact dermatology. She has always been a wonderful advocate for patients and staff. Dr Gordon has developed a real knack for securing resources and support from the administration of the two hospitals, sometimes without them even realising that they had agreed to a new project or program. She has always been extremely generous in her time for teaching and support to trainees and colleagues. Dr Gordon was a regular part of the SA dermatology team who provided service to Alice Springs and the NT over the years. Her dedication and gentle nature will be sorely missed, as well as her home grown produce, which often graced the staff lunch.

We wish Dr Gordon all the very best in her new pursuits and send her into the future with our sincere thanks for her contributions to dermatology in SA and beyond.

For a number of years, the Director of Training position has been well served by Dr Emma Haverhoek, who is thanked for her significant time and efforts. This role has now been taken over by Dr Emma Ryan, who already has put in considerable efforts, in addition to her other work for SA, trainees and College.

The SA Faculty dinner was well attended by members. Dr Lil Ellis is thanked for organising a great night of food and good company.

The Southern Adelaide Skin Society (SASS) was recently established to support teaching in dermatology and improve skills for junior doctors and medical students in

SA. In May 2019, the inaugural academic night was held at Flinders University, which was heavily subscribed with over 100 participants. The night featured a seminar by Associate Professor Gillian Marshman on common and important skin diseases. This was followed by a dinner and a dermatology rapid review exam-style revision session by the society's chair Dr Shihab Siddiquee. Given the positive feedback and strong interest shown at this night, the SASS looks forward to further events throughout the year and welcomes any support from College members or affiliates.

Dr Lachlan Warren has been sharing his wisdom and experience with rural General Practitioners (GPs) with six talks across areas including Port Lincoln, the Riverland and Mt. Gambier, which were well received.

Dr Romuald Czacowicz
Chair, SA Faculty



DR CHARLOTTE FORREST, DR JOYCE MA & DR CHLOE LIM



DR TODD WIADROWSKI, DR LISA GOWER, DAVID MILLER & DR KAREN KOH



DR SOPHIE PLAGAKIS, DR ELIZABETH ELLIS & DR RANDALL LONG



DR LYNNE GORDON & PROFESSOR DAVID GORDON



DR WARREN WEIGHTMAN, DR ANNE LEWIS & ASSOCIATE PROFESSOR DAVID ELLIS



DR EMMA RYAN, DR KATE NEWLAND, DR SIMON KHOURY, DR ELIZABETH ELLIS, DR ARABELLA WALLETT & DR RACHEL MANIFOLD



FACULTY DINNER SETTING



ASSOCIATE PROFESSOR GILLIAN MARSHMAN PRESENTING AT THE SOUTHERN ADELAIDE SKIN ASSOCIATION MEETING

WESTERN AUSTRALIAN FACULTY REPORT

The Western Australian (WA) Faculty continues to pursue opportunities to innovate service delivery in keeping with the WA health sustainability review. Currently, WA Faculty members have shown a preference to continue with historical public sector service delivery, with some hospitals looking to incorporate clinical nurse consultants and day procedures. The training program in WA has recently undergone accreditation, which will provide further opportunity for review of training and public services in the future.

The Faculty and College have recently met with the WA Department of Health to explore funding opportunities for store and forward teledermatology. Faculty members and invited guests have recently attended a health innovation luncheon with Deputy Premier and Health Minister, Hon Roger Cook MLA.

I had the pleasure of attending the University of Western Australia Biomedical and Medical School Prize Ceremony, as WA Faculty representative and mentor to Dr Dean Choong, recipient of the 2018 Hamish MacMillan Dermatology prize. I would like to take this opportunity to further congratulate our successful Fellowship examination candidates for 2019- Dr Su-Lin Chan, Dr Louise O'Halloran and Dr Niamh O'Sullivan- and welcome them to the WA Faculty.

Dr Tony Cacetta
Chair, WA Faculty



The Skin Hospital



DR DANA SLAPE

AT THE SKIN HOSPITAL

The Skin Hospital was pleased to award Dr Dana Slape a grant to support her attending as a guest speaker at a collaborative event between One Disease and Hot North held in Darwin, Northern Territory in August 2019. This multidisciplinary event focuses on the major public health issue of Indigenous Skin Health.

SKIN ORGANISATION REPORTS



DR JESSICA BALE, DR PETER FREDERIKSEN AND DR DANA SLAPE



DR VICTORIA SNAIRD AND DR POOJA KADAM

The Skin Hospital hosted a mid-year celebration in recognition of the success of our registrars in their final exams. Staff and doctors joined the celebration to officially congratulate them on their success.

COLLEGE FELLOWSHIP EXAMINATIONS

The Skin Hospital at Darlinghurst was delighted to host the College Viva examinations on 2 to 3 August 2019. It was a busy time, with 25 candidates from across Australia, site managers, expert external and internal observers, College managers and staff and many Bulldogs; including current trainees of the College, research Fellows, unaccredited registrars, hospital Registered Medical Officers and medical students.

The success of the two-day examination program reflected the excellent organisation by Dr Liz Dawes-Higgs and Dr Catherine Drummond, as well as other examiners, College management and staff and the commitment and time of all the people involved. We have received excellent feedback and appreciated the contributions of all those involved.

CONGRATULATIONS TO NSW FELLOWSHIP EXAM CANDIDATES

The Skin Hospital would like to congratulate the following New South Wales (NSW) registrars who were successful in their final exams:

Dr Alicia O'Connor
Dr Dana Slape
Dr Andrew Lee
Dr Adam Harris
Dr Jessica Bale
Dr Nira Chinniah
Dr Fatemeh Arianejad (Parisa)
Dr Alvin Chia
Dr Alvand Amiri.



DR JESSICA BALE, DR DANA SLAPE,
DR ALICIA O'CONNOR AND DR ADAM HARRIS

Special congratulations to Dr Andrew Lee and Dr Alicia O'Connor for receiving 2019 Fellowship Examination Prizes. Dr Lee was the recipient of the Galderma ACD Travelling Fellow Founder's Medal for Procedural Dermatology as well as the Paver Medal for Medical Dermatology and Dr O'Connor received the AAD Free Registration prize.

**NEW
SPECIALITY
CLINICS**

PATCH TESTING/ALLERGY CLINIC

Dr Alexis Lara Rivero has recently joined The Skin Hospital, allowing us to expand our patch testing clinics. Dr Lara Rivero sub-specialises in occupational dermatology including contact dermatitis and patch testing. Dr Eddie Lobel continues his clinics and sub-specialises in patch testing for contact allergy and medical legal reporting.



DR ALEXIS LARA RIVERO

HAIR AND NAILS CLINIC



DR TANUMAY
RAYCHAUDHURY

We have recently expanded our hair and nails clinic, with Dr Tanumay Raychaudhury joining our team to contribute his expertise in this area.

Dr Raychaudhury is an alumnus of the Christian Medical College, Vellore, India and a former Fellow at the Hospital Saint-Louis in Paris. He was the lead consultant at Tata Medical Centre, Kolkata, India. Dr Raychaudhury is also a Fellow of College.

**DERMATOLOGY AND
RHEUMATOLOGY CLINIC**

Darlinghurst is now offering a combined dermatology and rheumatology clinic. This sub-specialty includes psoriasis, psoriatic arthropathy and connective tissue disease. The clinics are led by Dr Anika Smith, dermatologist and Dr Richard Holland, rheumatologist.

EDUCATION

The Skin Hospital Education program continues to be a major focus for the hospital with six events held so far in 2019 and a further three planned.

The education series and conference highlights for dermatologists and dermatology registrars continues to attract strong attendance. Topics have been varied and the presentations insightful and engaging. The events are also proving to be a great opportunity to network with colleagues.

EVENTS HELD THIS YEAR

Topic	Speaker
Update on the 2019 American Academy of Dermatology (AAD) Annual Meeting in Washington, D.C.	Associate Professor Stephen Shumack
Systemic treatment for alopecia areata: When, why and how	Professor Rodney Sinclair
Dermoscopy and confocal microscopy/optical coherence tomography	Dr Helena Collgros and Dr Hsien Chan
Continuing partnership between Mohs surgeons and plastic surgeons	Dr Gilberto Moreno-Bonilla and Dr Leo Kim
Update on the World Congress of Dermatology, Milan	A/Prof Stephen Shumack
Cyber risk and privacy in dermatology: What you need to know	Various
Vulval disease: How to help a consistently neglected group of female patients	Associate Professor Gayle Fischer
Cutting edge psoriasis abstracts from World Congress of Dermatology, Milan: A conference analysis	Dr Phil Tong

UPCOMING EVENTS

Date - 2019	Speaker	Series	Topic
23 October 2019	Professor Kiarash Khosrotehrani	Education series	Understanding and management of patients with a high burden of keratinocyte cancer
13 November 2019	Professor Pablo Fernandez Penas	Conference highlights	European Academy of Dermatology and Venereology, Madrid
26 November 2019	Associate Professor Saxon Smith	Education series	Hidradenitis suppurativa

For further details go to skinhospital.edu.au/events

GP EDUCATIONAL EVENTS

The Skin Hospital is committed to providing further education and support for General Practitioners (GPs) in the field of dermatology. Following the successful evening education series run earlier in the year, four more events have been completed or scheduled in 2019.

GP EVENTS

Location	Topic	Speaker	Date
Darlinghurst	Common skin disorders	Dr Ebrahim Abdulla	4 September 2019
Westmead	Psoriasis/hair and nails	Dr Tanumay Raychaudhury and Dr Ebrahim Abdulla	26 September 2019
Darlinghurst	Psoriasis/hair and nails	Dr Tanumay Raychaudhury and Dr Ebrahim Abdulla	30 October 2019
Westmead	Male dermatology/lasers	Dr Bruno Blaya and Dr Deshan Sebaratnam	20 November 2019

OTHER EVENTS

Location	Topic	Date
Darlinghurst	The Skin Hospital dermatology prize- exam	12 October 2019

RESEARCH AND CLINICAL TRIALS

In line with our mission, The Skin Hospital is continuing to focus on growing the number of research projects. Following the appointment of Associate Professor Gayle Fischer as Head of Research, several key appointments have been made to support this growth.

Dr Minal Dalvi has been appointed Director of Research, overseeing the Research & Clinical Trials Unit at Darlinghurst and Westmead. Dr Dalvi has a keen interest in translational research in autoimmunity and infectious diseases. She earned her doctorate at University of Arizona, America, where her work focussed on studying the role of gene-environment interactions in

the development of asthma and allergies. Dr Dalvi's continued research interest led to her post-doctoral research work on HIV at New York University. In addition to her research experience, she also brings expertise in Intellectual Property Law and is a qualified patent attorney.

The expanded research team also includes two Deputy Directors of Research, Dr Deshan Sebaratnam and Dr Philip Tong. Both doctors are passionate about research and bring an enormous amount of skill and expertise to the roles.

Dr Sebaratnam has completed his Master of Medicine and a Fellowship at St John's Institute for Dermatology in London, England. He has a strong interest in teaching and research and is a Conjoint Senior Lecturer with the University of New South Wales (NSW). Dr Sebaratnam has published his research in international medical journals and has presented at conferences around the world.

Dr Tong underwent world-class research and dermatology training at Royal Prince Alfred Hospital, St Vincent's Hospital, Liverpool and Westmead Hospitals in NSW. He also completed his PhD in advanced biomedical imaging and skin immunology at Centenary Institute during this time. Currently Dr Tong is the Clinical Lead of the Skin Imaging and Inflammation Group at Centenary Institute and holds a public appointment at St Vincent's Hospital, Sydney, NSW, where he is also involved in the training of dermatology registrars and medical students.

Dr Janice Yeon will be joining the team to take as a sub-investigator at Westmead. Dr Yeon has completed a Bachelor of Medicine and Master of International Public Health and worked at Concord Repatriation General Hospital as Senior Resident Medical Officer.



DR MINAL DALVI



DR DESHAN SEBARATNAM



DR PHILLIP TONG

RESEARCH UPDATE

Dr Simon Lee and Dr Victoria Venning are conducting a Cosentyx trial, which is a comparative study of video-assisted medical consent compared to traditional doctor-patient consent for medical procedures. This project is in collaboration with Dr Rebecca Saunderson and has been ongoing at the Skin Hospital since March 2019. We have randomised 72 patients for this study.

Dr Venning presented her work on paediatric dermatopathology correlation at the 40th Australasian Dermatopathology Society Annual Scientific Meeting in Brisbane on 6 to 8 September 2019.

Research projects undertaken at The Skin Hospital this year have resulted in over 10 publications and include research in the areas of Mohs surgery, quality of life surrounding surgical procedures, dermatopathology, management of cutaneous lymphoma in Australia and tanning attitudes and behaviours in Australians.

CLINICAL TRIALS

The Skin Hospital is currently conducting 12 clinical trials for a range of dermatological conditions including psoriasis, alopecia, hives, eczema, vitiligo and eczema. The treatments being tested include biologics treatments that target key drivers of autoimmune diseases, particularly the study of the safety and effectiveness of several treatments that target the JAK-STAT signalling pathway, which plays a significant role in the pathogenesis of various autoimmune diseases.

BRAND AND IDENTITY



THE SKIN & CANCER FOUNDATION INC IS PLEASED TO ANNOUNCE ITS NEW IDENTITY AS THE SKIN HEALTH INSTITUTE.

This change more accurately reflects the broad role that the organisation plays in skin health. The Skin Health Institute, with its three core functions of treatment, education and research, distinguishes itself from other similar organisations by the range of treatment clinics, education programs and research and clinical trials, all under the one roof.

Alongside the new look and feel, the Institute is launching a fundraising campaign to support two exciting initiatives: a world-class conference centre to be housed on the roof of the existing building, and a burns scar revision clinic.

NEW CEO

Ms Caroline Mulcahy has been appointed as Chief Executive Officer (CEO) of the Skin Health Institute.

Ms Mulcahy comes to the Institute from the National Heart Foundation, where she was the General Manager, Business Transformation, Strategy and Insights, responsible for business improvement, strategy and performance, strategic projects and the transformation and transition of the Heart Foundation into one, unified organisation.

Prior to the Heart Foundation, she was the CEO at Carers Victoria and CEO at Melbourne IVF, leading both organisations through substantial growth and change.

Ms Mulcahy is a values-driven and awarded leader with more than 30 years of health experience in clinical care, operational and strategic planning and senior management roles. In recent years she has helped organisations implement new governance and business development structures and processes.

Ms Mulcahy originally trained as a nurse, has a Master of Science (Research Methods) and is a member of the Australian Institute of Company Directors.

RETIREMENT OF EXECUTIVE DIRECTOR CHRIS ARNOLD AM



CHRIS ARNOLD AM

After 10 years as Executive Director of the Skin & Cancer Foundation Inc, Chris Arnold AM retired from this role in October 2019. He leaves the Foundation in good shape and the Board is pleased to announce the appointment of his successor, Ms Caroline Mulcahy as above.

Mr Arnold will continue his consulting business with wife Margot, as well as now pro bono roles as an executive member of the MelCOR melanoma national registry pilot program, and as a Director of BioGrid Australia.



CAROLINE MULCAHY

AUSTRALASIAN SOCIETY OF COSMETIC DERMATOLOGISTS

The annual Australasian Society of Cosmetic Dermatologists (ASCD) Symposium was held at the Hilton Hotel in Sydney, New South Wales on 20 to 22 September 2019. The event was relocated to Sydney to provide the extra space for exhibitors.

A strong program of national and international speakers presented, together with an innovative workshop series. The Symposium was preceded by a Masterclass on the Thursday, providing practical hands-on advice regarding photography, complications, communication skills, tips on injecting, anatomy and patient assessments.

A line-up of world-class experts presented to the 500-plus delegates, including Dr Nabila Azib from the United Arab Emirates, Dr Sonia Batra from America, Dr Antonio Campo from Spain, Dr Peter Shumaker from America, Dr Ahn Gun Young from Korea, Dr Nowell Solish from Canada and Dr Qiong Li from China.

The ASCD is part of the Skin Health Institute.



EVENTS

RURAL DERMATOLOGY MEETING, 6-8 SEPTEMBER 2019, ORANGE, NEW SOUTH WALES

The College 6th Rural Dermatology Meeting was held at the Orange Agricultural Institute.



MEETING SESSIONS

Thank you to Convenors Dr Ian Hamann and Dr Michelle McRae; and also from the NSW Faculty, Dr Christine Beveridge, Dr Frances Tefany, Dr Lachlan Warren, Dr Nicholas Stewart, Dr Rachael Anforth, Dr Rebecca Saunderson and Associate Professor Saxon Smith; who put together an excellent program around the three themes of:

1. Rural research, training and teaching
2. Shared care in rural practice
3. Rural practice- sustainability and solutions.



CONVENOR DR MICHELLE MCRAE ADDRESSES WELCOME FUNCTION GUESTS

INVITED SPEAKERS INCLUDED:

- **PROFESSOR WENDY HU**, Professor of Medical Education, Associate Dean of Learning and Innovation at Western Sydney University and Honorary Medical Officer for the Sydney Children's Hospital Network
- **ASSOCIATE PROFESSOR MARK ARNOLD**, Head of the Rural Clinical School of the University of Sydney and consultant rheumatologist in Dubbo/Orange
- **DR JEREMY CURTIN**, general ophthalmologist in Orange
- **ASSOCIATE PROFESSOR CATHERINE HAWKE**, Deputy Head of the Rural Clinical School of the University of Sydney in Dubbo/Orange, public health physician and Chair of the Western Research Alliance
- **DR ROBERT ZIELINSKI**, medical oncologist at the Western Area Health Service and Director of Clinical Trials in Orange
- **DR DOUGLAS LENTON**, haematologist at the Western Area Health Service in Orange
- **DR WILLIAM RYMAN**, who spoke on Mohs surgery
- **ASSOCIATE PROFESSOR ORLI WARGON**, who spoke on paediatric dermatology.

Over 90 attendees were registered, with the meetings attended by 37 Fellows, 10 trainees, one other specialist, 16 registrars, two medical students and two nurses.

On Friday evening, the welcome function was held at Racine, an authentic apple-packing shed on a vineyard. The dinner on Saturday was held at Zona, a beautifully renovated heritage house in the centre of town. The optional social tour was an aboriginal caves tour on Saturday.

While the weather was cold outside, and a few saw snow falling, the functions were warm and enjoyed by all. The food and beverages were spectacular, as to be expected for a renowned food and wine area.

Thank you to our event sponsors, without whom the Rural Dermatology Meeting would not be possible: Lilly, SunPharma, Abbvie, Novartis and Janssen.

Lilly

SUN
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abbvie

NOVARTIS

janssen

WELCOME FUNCTION AT RACINE



RACINE

CONVENORS DR IAN HAMANN, DR MICHELLE MCRAE AND PRESIDENT ASSOCIATE PROFESSOR DAVID FRANCIS



PRESIDENT ASSOCIATE PROFESSOR DAVID FRANCIS WITH CONVENORS DR MICHELLE MCRAE AND DR IAN HAMANN



DR IAN HAMANN PRESENTING



THE PRESIDENT ADDRESSES CONFERENCE DINNER GUESTS



RANGE-

ORANGE AGRICULTURAL INSTITUTE, ORANGE, NEW SOUTH WALES FRIDAY 6 TO SUNDAY 8 SEPTEMBER 2019

ORANGE AGRICULTURAL INSTITUTE



PROFESSOR MARK ARNOLD



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FACTS FROM THE A-Z OF SKIN

Mastocytosis is a condition where mast cells accumulate in the skin or sometimes in internal organs.

Mast cells are normal cells in the body, usually found in the skin and other tissues. Mast cells are part of our immune system and have a role in the body's ability to fight certain infections and the body's coordination of healing responses to an injury and reaction to an allergy.

Mast cells contain many different chemicals, such as histamine, that increase inflammation. In the skin this results in localised itching, swelling, redness and sometimes blistering.



DR ELENI YIASEMIDES



What did you like to do as a child?

I was a ballerina in my previous life. I spent most of my youth dancing. I did ballet, jazz, tap, contemporary and some salsa and ballroom dancing.

What did you want to be when you grew up?

I wanted to be an artist at one point. I really enjoyed art at school. I probably

would have become an architect if I didn't get into medical school. I still enjoy painting when I have spare time and am now collecting art as a side (and expensive) hobby.

Where was your first job?

I worked at my parents petrol station back in the day when driveway service was available. I used to fill the cars up with petrol, check the oil levels and the tyres too. It was good pocket money and I learnt a little of the basics about looking after a car.

What have you liked most about the places you have worked?

It's the staff that I have worked with that have provided the best memories and experiences in my career.

What do you like most about being a dermatologist?

I never envisaged that a career in dermatology would be so rewarding on so many levels. I get deep satisfaction from helping my patients, but in addition to this have all these other activities that provide me with great joy. Being involved with College committees and now the College Board have been terrific experiences. I have also been involved with media work, which has been very interesting and fun. I really enjoy travelling all around the world to attend dermatology related conferences. It has been a great way to meet people, get inspired and travel too.

I have a passion for skincare and cosmeceuticals and this is one of the reasons that I became a dermatologist. I get lots of media questions focused on skincare and have developed a skincare range that we sell at our clinic.

What are your current appointments and committee involvements both inside and outside of the College?

- Mohs Committee (Chair)
- A to Z of Skin Committee (ex-Chair)
- Continuing Professional Development Committee
- General Practice education for College and Royal Australian College of General Practitioners (RACGP)
- Board member
- Women on Boards
- Friends of the Australian Ballet
- Director of SouthDerm and Southern Suburbs day procedure centre
- Media work.

Do you have/what is your area of speciality?

Mohs surgery, dermatology procedural work and cosmetics.

What's the best thing to happen since you started working as a dermatologist?

The media work has been something I never expected to be doing as a dermatologist. I got interviewed by Marie Claire magazine. Seeing my name in a popular fashion magazine was something that I never expected to occur. A photo of me also ended up in the social pages of Sydney Morning Herald from an event I attended promoting skincare advice. I think educating the public about the work we do as dermatologists is essential for our survival as a College.

What one word would you use to describe your doctor-patient relationship style?

Chatty.

What medical breakthroughs that have impacted the way you work?

I think lasers and light therapies have made a significant contribution to how we can safely treat a variety of patient concerns.

THE AUSTRALASIAN COLLEGE OF DERMATOLOGISTS

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Disclaimer:

The Australasian College of Dermatologists wishes to encourage debate and exchanges of ideas amongst Fellows through *The Mole*.

Nevertheless, the opinions expressed in articles in *The Mole* are those of the authors and are not necessarily those of the College.