

**INTERNATIONAL LEAGUE OF DERMATOLOGICAL SOCIETIES**  
**International Committee of Dermatology**

**MINUTES**

March 20, 2003 • San Francisco, California, USA

**Present**

Robin Marks, MBBS, *President*  
Ana Kaminsky, *Treasurer*

Francisco Camacho-Martinez, MD, PhD  
Ricardo Galimberti, MD  
Roderick J. Hay, MD  
Andreas D. Katsambas, MD  
Stephen I. Katz, MD, PhD  
David I. McLean, MD  
Takeji Nishikawa, MD

Jean-Paul Ortonne, MD  
Adrian-Martin Pierini, MD  
Marcia Ramos-e-Silva, MD, PhD  
Jean Revuz, MD, PhD  
Jean-Hilaire Saurat, MD  
Wolfram Sterry, MD  
Barbara Nichols, *Staff*

**Absent**

Georg Stingl, MD, *Secretary-General*  
Benvenuto Giannotti, MD  
Kristian Thestrup-Pedersen, MD, PhD

**1. CALL TO ORDER, APPROVAL OF MINUTES**

Dr. Marks called the meeting to order at 1:00 pm and welcomed Board members to the first working meeting of the 2003-2007 ILDS Board.

The Minutes of the July 5, 2002 meeting of the ICD were approved as circulated.

**2. PRESIDENT'S REPORT**

Referring to his written report and the materials distributed in advance of this meeting, Dr. Marks indicated that it can be seen from the reports of the various committees what we hope to achieve in the future. Noting that his vision is for every dermatological society and every dermatologist to know the ILDS and what we do, he emphasized that we are moving toward positioning ourselves globally. To achieve this, more administrative support will be required in the future. A long-term view is for the ILDS to have a permanent office that would include the IFD and perhaps also the World Congress. Dr. Katz indicated that several years ago a very successful long-term planning retreat was held in Greece; he suggested that another such event be planned for the near future.

**3. SECRETARY-GENERAL'S REPORT**

Due to pressing academic obligations in Vienna, Dr. Stingl could not attend this meeting. The committee was referred to the written report which outlined the current status of the ILDS membership and requested review of an application for membership from the Society of Dermatovenerology (Turkey). Additionally, an e-mail request for consideration of membership was recently received from the Hellenic Society for Dermatological Surgery.

In response to a question regarding the process for review of membership applications and how this might relate to the newly-created Membership Committee, it was moved, seconded and approved that in the future all applications should be sent first to the Secretary General then to the Membership Committee for their examination.

It was further agreed that the current applications for membership be held until the deliberations of the Membership Committee have been completed in Singapore.

#### **4. TREASURER'S REPORT**

Dr. Kaminsky stated that the ILDS Budget for 2003-2007 had been circulated to the ICD in January and approved unanimously.

Dr. Revuz reported the amount coming to the ILDS/IFD as a result of the Paris Congress is \$1,018,495. Of this amount, \$268,025, represents the \$25 per capita fee. The balance will be applied to the budget of the IFD.

A discussion paper distributed by Dr. McLean requested consideration of the ILdS funding a round trip economy airfare for attendance at one ICD meeting a year. It is exceedingly expensive for some to attend these committee meetings and many members are not funded by their departments nor by industry. Furthermore, Board meetings may not be held in association with an international meeting that an ICD member would ordinarily attend. Dr. Katz stated that a concern in the past has been the perceived misconception that the ICD travels around to rather grand places; more important, ICD members have always had the ability to request travel support when necessary. However, the sentiment in further discussion was that members should not have to ask; if they do not require support they can simply refuse. Dr. Sterry commented that Board members make a major investment of time in order to serve on the ICD; there should be no reason why an individual should pay financially as well.

There was discussion about the budget implications of such a recommendation. It was agreed that with the income from the World Congress of Dermatology, plus the funded site visit to Buenos Aires next year, there are adequate funds available in the current budget to underpin this recommendation. It was moved, seconded and passed, with one negative vote, that full economy airfare to attend one Board meeting a year be made available to Board members.

#### **5. FINANCE COMMITTEE**

Dr. Marks indicated a report had not been received, but he has had several preliminary discussions with Dr. Thestrup-Pedersen regarding the role of the Finance Committee, primarily that of fund-raising. Another task that has been identified is formalizing the financial reporting for the World Congress to ensure that the process is open and accountable. A local committee organizes a World Congress on behalf of the ILDS and now that 50% of the WCD surplus is to accrue to the ILDS, we should look into structuring the financial reporting.

It was agreed that the Finance Committee would consider this restructuring and financial reporting and make recommendations to the next Board meeting in Singapore. It was also agreed that Dr. Saurat would add his expertise to this committee in view of his recent similar reorganization of the EADV. It was also agreed that a Board member from each of the last three World Congresses; i.e., New York,

Sydney and Paris, would be requested to provide their input into the deliberations of the Finance Committee and their final recommendation.

## **6. 21<sup>st</sup> WORLD CONGRESS OF DERMATOLOGY**

Doctors Galimberti and Pierini circulated a written report naming the Local Committee and Committee Chairs of the 21<sup>st</sup> WCD in Buenos Aires, and listing the space available for the exhibition and scientific sessions. The report included a preliminary program by day and type of session.

It was agreed that the ICD site visit in 2004 will be planned over the following dates: Arrival Thursday, September 30 and departure Sunday evening, October 3, 2004.

## **7. AWARDS**

Dr. Katsambas indicated that the aim of the Awards process is to acknowledge by way of international recognition certain dermatologists whom throughout the years have provided outstanding service to the dermatological field. It also acts as part of the promotion of the ILDS as a global body in dermatology. He provided several options for the selection and presentation of ILDS awards. In discussion, the following points were agreed: 1) There will continue to be one major award, referred to as the ILDS Distinguished Service Award, named by the ICD and presented only at the time of the World Congress, 2) Multiple Certificates of Appreciation will continue to be given annually, 3) Member and Affiliated Member Societies will be asked to nominate individuals for a Certificate of Appreciation, 4) It must be made clear to the Societies that there is a selection process and that not all nominations will be accepted.

Dr. Katsambas will draft the final letter that will go to the societies in the very near future. This will enable consideration and recommendations for awards for the next 12 months to be made by the Awards Committee in their report to the Board in Singapore. In the meantime, there was unanimous support for the recommendation that Dr. Jose Mascaro be awarded a Certificate of Appreciation at the EADV meeting in Barcelona. Further nominations of a number of members from Latin America were referred back to the Awards Committee for their consideration and recommendations in Singapore.

## **8. COMMISSIONS & INTERNATIONAL HEALTH ORGANIZATIONS**

An update on changes that have been taking place at the WHO was provided by Dr. Saurat. NGOs now have greater importance in the activities of the WHO and the ILDS can take a more active role as the primary representation of dermatology. The two key points at present are: 1) continuation of our status as an accredited NGO and 2) explore how we can further collaborate through Moshi and other programs. Dr. Saurat suggested that the goal of the ILDS in this regard should be a focus of a long-term planning retreat, if held.

## **9. DERMLINK**

Discussion of Dr. Giannotti's preliminary report included the following comments: 1) The annual budget for Dermlink grants has been increased to \$25,000 per year, 2) The program should continue more or less as is, but with greater visibility and promoted on a wider basis, 3) The World Congress scholarship program should be considered as an activity of the ILDS and identified as such. It was recommended that the President write a letter to the societies informing them of the Dermlink awards for this year, which could be circulated with the newsletter to go out following the Board meeting.

## **10. INTERNATIONAL FOUNDATION FOR DERMATOLOGY**

Dr. Hay provided an overview of his extensive written report, beginning with a brief explanation of the operation and governance of the Regional Dermatological Training Centre (RDTC) located in Moshi, Tanzania, which is a joint project between the Tanzanian government and ourselves. He also distributed a financial report projecting income and expense for 2003, to which it was suggested that funds be added to support Dr. Hay's required travel. Stating that improving the fund raising potential of the IFD is a priority, Dr. Hay indicated that one proposal is the employment of a fund raiser. Additionally, an objective would be to seek the means to control the four commonest skin diseases in differing regions; in this context he would like to hold a workshop in Atlanta, bringing in the CDC, for example, to discuss what other diseases might be controlled or eliminated. Dr. Hay indicated his desire to employ a person part-time to coordinate this workshop.

The committee endorsed the report of Dr. Hay and supported his current proposals. In thanking Dr. Hay for his report, Dr. Marks stated that he feels very confident about a positive future of the IFD.

Dr. Goh Chee Leok was asked to join this part of the Board meeting in order to provide an update on the National Skin Centre Dermatology Update 2003 in Singapore, June 27-29, cosponsored by the ILDS in benefit of the IFD. Dr. Goh distributed copies of the Preliminary Program and indicated that the attendance is anticipated to be 300-400 registrants. It was noted that the IFD will meet on Friday afternoon, June 27, and the ICD will meet all day on Saturday, June 28. Dr. Marks congratulated Dr. Goh on a "sparkling" program.

## **11. DEFINING DERMATOVENEREOLOGY**

As noted in Dr. Marks' initial report, defining dermatovenereology will enable us to have continuing contact with our member societies as we seek information about what are the boundaries of dermatology in the various countries throughout the world. This will be one of the areas relevant to the ILDS as the global body for dermatology over the next few years. A new committee under the chairmanship of Dr. Georg Stingl has been appointed to take on this difficult task and a preliminary report will be made at the next Board meeting. A first step will be to send out a questionnaire to member societies about the scope of the discipline in their respective countries.

## **12. COMMUNICATIONS COMMITTEE**

Dr. Sterry, summarizing his written report, stated that the ILDS is not very well known to the general dermatologist; we need to place more emphasis on improving our communications with our member societies and their individual members. A letter will soon be sent to societies with a questionnaire to determine the first steps in this regard. Suggestions include more frequent newsletters with wider distribution, updating the website and developing a listing of major pharmaceutical companies, an International White Book on Dermatology similar to the one available in Europe, as well as a "Who/How" project. Additionally, press releases and press conferences could be called for public information purposes. Dr. Marks congratulated Dr. Sterry on a very broad report and noted that we will proceed step-by-step to implement such communications programs as we are able to undertake in the future.

Ms Nichols reported that a newsletter will be in preparation soon after this meeting. Board members are urged to provide material for this issue.

### **13. 20<sup>th</sup> WORLD CONGRESS OF DERMATOLOGY**

Dr. Revuz reported that the final number of registrants is 12,099 of which 10,721 were paying registrants including 1,141 students and 203 nurses; 138 countries were represented. Abstracts numbered 3,848 with more than 2,200 of them submitted on line. There were 188 exhibition booths (6050 net square meters). Nineteen parallel sessions were held each day. The Board again congratulated Doctors Revuz and Ortonne on a most successful congress.

### **14. NOMINATION/ELECTION TASK FORCE**

In response to concerns expressed about the recent ICD election, a task force was appointed to review the entire structure, including the number of delegates per country, with the goal of instituting a more democratic and transparent process. Dr. Revuz, chairman, reported that a majority of people feel that the current system should not continue as is. In the months since the election the task force has explored the nature of the ICD, the possibilities of regional or global representation, the selection of nominees and the balloting process.

Dr. Marks indicated that a meeting has been scheduled for the following day with representatives of the AAD leadership to discuss their concerns about the recent election. A goal of this meeting is to provide a positive direction in our relationship and to explore possible remedies, emphasizing our work in developing countries. It was recommended that the ILDS policy of co-opting representation on the ICD to serve a specific purpose be put into play as it is important to have such participation in the formal review of the nomination process. Dr. Neil Swanson was suggested as someone with sound experience in this regard. It was moved, seconded and approved to authorize the ILDS President, at his discretion, to name Dr. Neil Swanson as an ad hoc member of the ICD to provide input into the discussions of improving the ICD presentation, nominations and election process.

During the discussion of the continuing task force deliberations, it was moved, seconded and passed that nominations made by member societies should be elected by the societies in a democratic way and not be selected by the ICD.

### **15. MEMBERSHIP COMMITTEE**

Dr. Ortonne, committee chair, provided an overview of discussions among members of the Membership Committee. There are difficult questions as to who should and should not be admitted into ILDS membership, the primary one being whether a society representing only a branch or a subspecialty of dermatovenereology, or focusing on a particular group of diseases, should be admitted. It must be noted that whatever the answer, there are implications with regard to the elections process; i.e., the number of delegates per country. It is expected that some concrete proposals will be presented at the next meeting of the Board, in Singapore. The current societies applying for membership, including the Society of Dermatovenereology, Turkey, were to be referred to this committee with recommendations about their admission to the ILDS being finalized in Singapore.

### **16. OTHER BUSINESS**

a) The committee was referred to a letter from past-ICD member Dr. Alan Cooper, with several organizational suggestions for consideration in the future. His recommendations will be referred to the appropriate committees.

b) The matter of creating an ILDS Mission Statement will be discussed at the next ICD meeting.

### **17. NEXT ICD MEETING**

The next ICD meeting is scheduled for June 27-29, 2003, in Singapore. The schedule is as follows:

Thursday, June 26	- Arrival
Friday afternoon, June 27	- IFD meeting
Saturday, June 28, all day	- ICD meeting
Sunday, June 29	- Departure

### **18. ADJOURNMENT**

The meeting was adjourned at 5:00 p.m.