CARIBBEAN DERMATOLOGY ASSOCIATION

1992

26th CARIBBEAN DERMATOLOGY CONFERENCE

Coco Palm Resort, St. Lucia

November 8 - 11, 2017

PROGRAMME

2017

Reaching Out

Improving Skin Care for All

ACNE • ANTIAGING • PIGMENTATION • MELASMA

DISCOVER THE TRANSFORMING POWER OF OUR MANDELIC ACID PEELS

MELANOPEEL®
SKIN CLARITY SYSTEM

A TRULY UNIVERSAL PEEL & MEDICAL SKIN CARE SYSTEM

www.melanopeel.com

1-(424)-245-7335
USA & Caribbean

TABLE OF CONTENTS

Messages	2
About the Conference	4
Shuttle Schedule	7
Social Functions	8
Sponsors & Exhibitors	10
Profile of St. Lucia	11
Schedule at a Glance	13
The “Apple” Award	14
Conference Schedule	15
Abstracts	19
Faculty	28

MESSAGE FROM THE PRESIDENT

Dear Colleagues and Friends:

Welcome to St. Lucia, island of the Pitons, where over the next four days we meet for the 26th Annual Meeting of the Caribbean Dermatology Association. Please join me in thanking the local Planning Team chaired by Dr. Adela Lalsingh. Adela and her St. Lucian colleagues have worked tirelessly over the last year to ensure that we have a wonderful meeting that is academically sound and that our stay in their country will be a hospitable one.

We extend a warm Caribbean welcome to our Guest Speaker, Dr. Natalie Stone from the United Kingdom and look forward to learning from her delivery of the Lois LaGrenade lecture and other invaluable contributions which she will make to the meeting overall. We have no doubt that she will take some time to enjoy some of what Caribbean life has to offer while she is here.

You will note that the Executive and planning team have responded positively to the suggestions made at our last Annual General Meeting by including two workshops in the programme this year, one on Contact Dermatitis and the other on Dermoscopy. I am happy that registration for the workshops has gone well and am sure that they will provide you with information that you can take back to your practices.

We extend our gratitude to the members of the pharmaceutical and medical device industries for their continued support over the years. We do appreciate the efforts that their representatives make on our behalf as sponsorship providers.

Additionally, we thank Mr. Hanif Smith and his team at SMTC, our Secretariat, for their hard work in planning and executing this meeting.

The Executive Committee hopes to share fellowship with you all while we are here and I wish for everyone an enjoyable meeting and a safe return to your homes and families after our conference has come to an end.

Best wishes.

Dr. Richard Desnoes
President,
Caribbean Dermatology Association

MESSAGE FROM THE CHAIR

Dear Colleagues,

I am pleased to chair the Caribbean Dermatology Association (CDA) Conference at such an exciting time in Dermatology. There have been many CDA meetings all over the Caribbean and beyond, and as I review the sessions of this programme , I have to say this is truly great content. The scientific programme for CDA 2017 is jam-packed and has been carefully crafted to incorporate a pre-conference Cosmetology Workshop, Dermoscopy and Contact Dermatitis workshops, and live demonstrations with dermatopathology inputs. All these highlight the expansive list of offerings, making this conference an unmissable event.

Those of you who are familiar with the CDA will know that no conference passes us without ample opportunity to socialize and celebrate our profession in more informal surroundings, like our dinner cruise on Friday evening and beach lime on Saturday afternoon.

The local Planning Committee in St. Lucia considers it an honour that St.Lucia has been chosen to host the 26th annual conference, and can assure you that you will all have a great time. We extend the warmest welcome to all our colleagues both new and returning.

Sincerely,

Dr. Adela Lalsingh
Conference Chair

ABOUT THE CONFERENCE

The Annual Caribbean Dermatology Conference is the premier opportunity for the Caribbean's Dermatologists to be informed, educated and updated on the latest scientific, surgical and clinical developments in the diagnosis, treatment and management of the dermatology patient in the Caribbean. Various treatments, management approaches and diagnostic tools will be assessed for their applicability and accessibility within the Caribbean.

As always, the Annual Caribbean Dermatology Conference will serve to cultivate and maintain vibrant collegial relationships between the Caribbean's Dermatologists, while allowing them the opportunity to learn about the territories and cultures of the CDA's member countries. The Annual CDA Conference is attended by doctors from the Caribbean, the United Kingdom, Canada, the United States of America, and the US Virgin Islands.

Educational Objectives

At the completion of this Conference, participants should:

1. Be able to identify developments that can positively impact the diagnosis, treatment, and management of dermatological diseases and conditions within the Caribbean region.
2. Have a better understanding of diagnostic and management approaches to challenging cases through the presentation and discussion of live clinical cases.
3. Be prepared to apply the knowledge gained to decisions regarding the diagnosis, management and treatment of dermatological patients in the Caribbean.

Accreditation Statement

The 26th Annual Caribbean Dermatology Conference has been approved for **Continuing Medical Education Credits** by the **National Committee of Continuing Medical Education** of the **Medical Council of Jamaica** for a maximum of **fourteen (14) hours of credit**. Each participant should claim only those CME hours actually spent in the activity.

abbvie

For more information: Medical Department in AbbVie, S.A.
Address: Diagonal 6, 10-50, Zona 10. Edificio Interamericas,
Torre Norte, Piso 16. Guatemala City, Guatemala
Phone: (502) 2210-3000 / InfoMed.LA@abbvie.com / www.AbbViemedinfo.com
95-5374/102017

Faculty Disclosures

In its efforts to ensure balance, independence, objectivity, and scientific rigour in its continuing medical educational programmes, the Caribbean Dermatology Association requires that all faculty participating in any CDA CME activity disclose to the audience any real or apparent conflict(s) of interest that may have direct bearing on the subject matter of the programme, and any off-label use of products that will be discussed.

Disclosure of Potential Conflicts of Interest and Off-Label Use

The following speaker **HAS** indicated the listed relationship, which poses a potential conflict of interest.

Rachael Eckel **Medical Advisory Committee Member:** ZO Skin Health

The following speakers have indicated that they **DO NOT HAVE** such a relationship to disclose.

Althea East-Innis
Arusha Campbell-Chambers
Kavita Deonarine
Michael Fitz-Henley
Natalie Stone
Neil Persadsingh
Nicola Briand
Patricia Yap
Rebeca De Miguel Madurga
Sandra McLeod
Sean E. M Bullen
Stephen K. Tyring
Suleman Bhamjee

The following speakers **HAVE** indicated they will be discussing off-label products in their presentations.

Arusha Campbell-Chambers
Neil Persadsingh

The following speakers **HAVE** indicated they will be **NOT BE** discussing off-label products in their presentations.

Althea East-Innis
Kavita Deonarine
Michael Fitz-Henley
Natalie Stone
Nicola Briand
Patricia Yap
Rachael Eckel
Rebeca De Miguel Madurga
Sandra McLeod
Sean E. M Bullen
Stephen K. Tyring
Suleman Bhamjee

Evaluations and CME Certificates

As part of the Association's efforts to reduce the carbon footprint of the Conference, participants will be asked to complete evaluations electronically and CME certificates will be sent by e-mail at the conclusion of the meeting.

On-Site Registration & Office Hours

Wednesday	November 8, 2017	2:00pm - 6:00pm (*Coco-Palm Resort*)
Thursday	November 9, 2017	8:00am - 5:00pm (*Golden Palm Event Center)*
Friday	November 10, 2017	8:00am - 5:00pm (*Golden Palm Event Center)*
Saturday	November 11, 2017	8:00am - 11:30pm (*Golden Palm Event Center)*

Connect and Engage

WiFi will be available in the meeting and exhibit room at the Golden Palm Event Center. Follow us on Facebook, tweet at us **@CaribDerm,** and use the hashtag **#CDA2017StLucia** to connect with and engage faculty, staff and your fellow attendees.

Name Badges

Your name badge serves as your passport to all educational sessions and the exhibit area. You are asked to wear your name badge at all times. Social function tickets will be handed out along with name badges, and must be presented at each event. Participants will not be admitted to social functions without the appropriate ticket.

We recommend for your safety that you do not wear your name badge outside of the hotel and conference function areas.

Refunds and Exchanges

Refunds will not be issued until after the Conference. Tickets for Conference social events are NOT refundable.

Special Dietary Requirements

Individuals with special dietary requirements must request special meals (vegetarian/vegan) 24 hours in advance, at the Conference Secretariat. We regret that requests for special meals not made in advance may not be honoured.

Lost & Found

If you have lost or found an item, please contact the CDA Conference Secretariat.

No Smoking Policy

The use of tobacco products, personal vaporizers or electronic nicotine delivery systems is strictly prohibited in all meeting and function areas hosting CDA events. Thank you for your compliance.

ZO® Skin Pigmentation Solutions

Developed by Zein Obagi, MD

ZO® SKIN HEALTH
BY ZEIN OBAGI MD

INNOVATIVE

Pigmentation Treatments from Zein Obagi, MD

It's time for a change. Many treatments for hyperpigmentation are outdated, ineffective and not compliant with FDA regulations. ZO® Medical solutions provide physicians a choice of HQ and non-HQ treatment systems to stabilize and correct a wide range of hyperpigmentation conditions.

Transformational Results in 6 Weeks

ZO® pigmentation solutions utilize novel formulations and innovative protocols to optimize the treatment of hyperpigmentation.

ZO® Multi-Therapy Hydroquinone System

With an emphasis on bleaching, stabilization, and blending, the ZO® HQ system is safer and more effective for all skin types.

ZO® Non-Hydroquinone Hyperpigmentation System

Stabilization and blending are the focus of the ZO® Non-HQ system for pigmentation control, maintenance, and prevention.

ZO® 3-Step Peel

This innovative exfoliating peel stimulates, enhances and extends results after completing a ZO® pigmentation treatment.

DERMEDICA MEDICAL
Exclusive ZO® Skin Health Caribbean Distributor
Dermedicamedical.com
1 (868) 720-5379

Dr. Zein E Obagi, MD
ZO® Skin Health
Medical Director

CIDA 1992

Before Treatment *After Treatment*

VISIT OUR BOOTH AT THE CDA

Visit our booth at the CDA to learn more about ZO® Skin Health products and protocols. ZO® Skin Health Masterclass training opportunities available. Contact us to find out more.

SHUTTLE SCHEDULE

Thursday November 9

From Coco Palm To Golden Palms

- 7:50am
- 8:00am
- 5:30pm

From Golden Palms To Coco Palm

- 2:00pm
- 3:45pm
- 9:00pm
- 10:00pm

Friday November 10

From Coco Palm To Golden Palms

- 8:00am
- 8:10am

From Coco Palm To Rodney Bay Marina

- 6:30pm

From Golden Palms To Coco Palm

- 2:00pm
- 4:00pm

From Rodney Bay Marina to Coco Palm

- 10:00pm

Saturday November 11

From Coco Palm To Golden Palms

- 8:00am
- 8:10am

From Coco Palm To Pigeon Island

- 1:00pm

From Golden Palms To Coco Palm

- 12:00pm

From Pigeon Island to Coco Palm

- 4:30pm

Dinner Cruise

DATE: November 10, 2017

WHERE: On the Carnival Sailing Catamaran, Rodney Bay, Marina.
Shuttle bus will pick up patrons from the **Coco Palm Resort Lobby** at **6:30pm**

DRESS CODE: Resort Casual
Sweater or Cardigan, as it may get chilly out at sea.
Shoes can be worn on the vessel but NO high heels, preferably flat shoes.

DURATION: 6:30pm - 10:00pm (3 Hours)

DETAILS: The cruise will set sail from Rodney Bay Marina to Reduit Beach passing Marigot Bay, one of the most beautiful bays in the Caribbean. Dinner will be served buffet style as we sail pass the beautiful lights on the rugged west coast of St Lucia. On our return up the coast, the DJ will get the party started. The cruise is scheduled to return to the dock at 10pm. Shuttle bus will be waiting take patrons back to Coco Palm Resort.

Full Safety Briefing will be given before the vessel leaves the dock. If a guest has a concern about sea sickness, they should take the necessary medication before departing the hotel. However, the Caribbean Sea is very calm and the catamaran is a large vessel and tends not to rock too much in the sea.

Beach Lime

DATE: November 11, 2017

WHERE: Pigeon Point Beach
Shuttle bus will pick up patrons from the **Coco Palm Resort Lobby** at **1:00pm**

What to Wear/Bring:

Beachwear	Sunblock
Hat	Sunglasses
Towel	Slippers

DURATION: 1:00pm - 4:30pm (3.5 hours)

DETAILS: Fun and frolic in the sun. Pigeon Point Beach is one of St. Lucia's better known historical areas located on Pigeon Island. Near the beach, you can explore ruins of a fortress, barracks, and rusty cannons that date back to the middle of the 1700s.

The shores of Pigeon Point beach are endowed with groves of lush tropical trees, including big banyans, that tower high above the sands. From this beach you can take in great views of the coast and nearby Martinique. This quaint little beach is covered in soft white sand, and is an ideal place for a picnic.

The menu will include Barbecued Chicken, Fish, Steamed Vegetables, Tossed Green Salad, sides, and an assortment of cakes. Massages will be available on the beach at an additional cost.

SPONSORS & EXHIBITORS

Our Thanks to our Sponsors and Exhibitors for their continued support

Platinum Sponsors

abbvie

MELANOPEEL® SKIN CLARITY SYSTEM

ZO SKIN HEALTH INC BY ZEIN OBAGI MD

Sliver Sponsors

More Pharma

Syneron Candela

Exhibitors

3Gen, Inc.

Aerolase

Alex Gourmet Co. Ltd

Cannon Hygiene

Galderma Laboratories

Pharmtech Caribbean Limited

We also recognise the support of:

Medimpex West Indies

◊ Atwell Dalgleish Co. St. Lucia Ltd. ◊ Colombian Emeralds International

Gilbert Jn. Francois ◊ M and C Drug Store ◊ Massy Supermarket Chain ◊ Sea Island Cotton Shop

◊ St. Lucia Distillers Group of Companies ◊ Tapion Hospital

Ministry of Health and Wellness St. Lucia ◊ The Tourist Board St. Lucia ◊ World's Finest Chocolate

PROFILE OF ST. LUCIA

St. Lucia is an island of unblemished landscapes and post-card perfect scenery. One of the Windward Islands of the Lesser Antilles, St. Lucia is located midway down the Eastern Caribbean chain, between Martinique and St. Vincent, and northwest of Barbados. The Atlantic Ocean kisses its eastern shore, while the beaches of the west coast are caressed by the calm Caribbean Sea. The climate is tropical, moderated by northeast trade winds. St. Lucia is a volcanic island and is one of the more mountainous Caribbean islands. Its highest point is Mount Gimie, at 950 metres (3,120 ft) above sea level. Two other mountains, the Pitons, form the island's most famous landmark, and are represented on the country's flag.

St. Lucia was named after Saint Lucy of Syracuse by the French, the first European colonizers in 1660. In ensuing years, rule of the island changed frequently. It became known as the "*Helen of the West Indies*" because it switched so often between British and French control. The influence of the French lives on in the patois spoken in the country. On February 22, 1979, Saint Lucia became an independent state of the Commonwealth of Nations, associated with the United Kingdom.

The Pitons, soaring 2,000 feet above sea level, shelter magnificent rain forests where a variety of flora and fauna flourish. The island's people have earned a well-deserved reputation for their warmth and charm, and the island itself is dotted with aged fortresses, small villages, and open-air markets. The island's reefs offer excellent snorkelling and scuba diving, and the rainforest preserves of the mountainous interior are one of the Caribbean's finest locales for hiking and bird-watching. The Soufriere volcano is the world's only drive-in volcanic crater.

St. Lucia Facts-at-a-Glance

- **Full name:** Saint Lucia
- **Population:** 174,000 (UN, 2010)
- **Area:** 620 sq km
- **Capital:** Castries
- **Currency:** Eastern Caribbean Dollar (EC$)

Sources:

http://www.stlucia.org/

http://www.geographia.com/st-lucia/

http://news.bbc.co.uk/2/hi/americas/country_profiles/1210491.stm

http://www.fco.gov.uk/en/travel-and-living-abroad/travel-advice-by-country/country-profile/north-central-america/st-lucia/

Aerolase® Neo®
Best Laser for Hair Removal & PFB

The New Standard for Treating Skin of Color and Tanned Skin

Aerolase lasers enable increased treatment efficacy, a broader range of treatment options and a gold-standard margin of safety for greater patient satisfaction on all skin types.

- Hair Removal and PFB
- Skin Rejuvenation
- Post-Inflammatory Hyperpigmentation
- Active Acne & Acne Scars
- Melasma
- Nail Fungus

"I exclusively treat skin of color in my practice. I spent several years researching the aesthetic laser market before making a purchase. I am very pleased to say that the Aerolase Neo has exceeded my expectations in terms of efficacy and safety for my patients, while being much more affordable than other aesthetic laser systems on the market."
- Dr. Neil Persadsingh, Kingston, Jamiaca

"I conducted a study on patient self-esteem before and after treating their PFB with the Aerolase Neo. Not only did the patients love the laser treatment, but their self-esteem raised significantly after their course of treatments."
- Dr. Arusha Campbell-Chambers, Montego Bay, Jamaica

Hair Removal After 5 Tx
Tesoro Laser Spa

PFB & PIH After 3 Tx
Dr. Juliette Hepburn

Melasma & Rejuvenation
After 1 Tx with Peel
Cheryl Burgess, MD

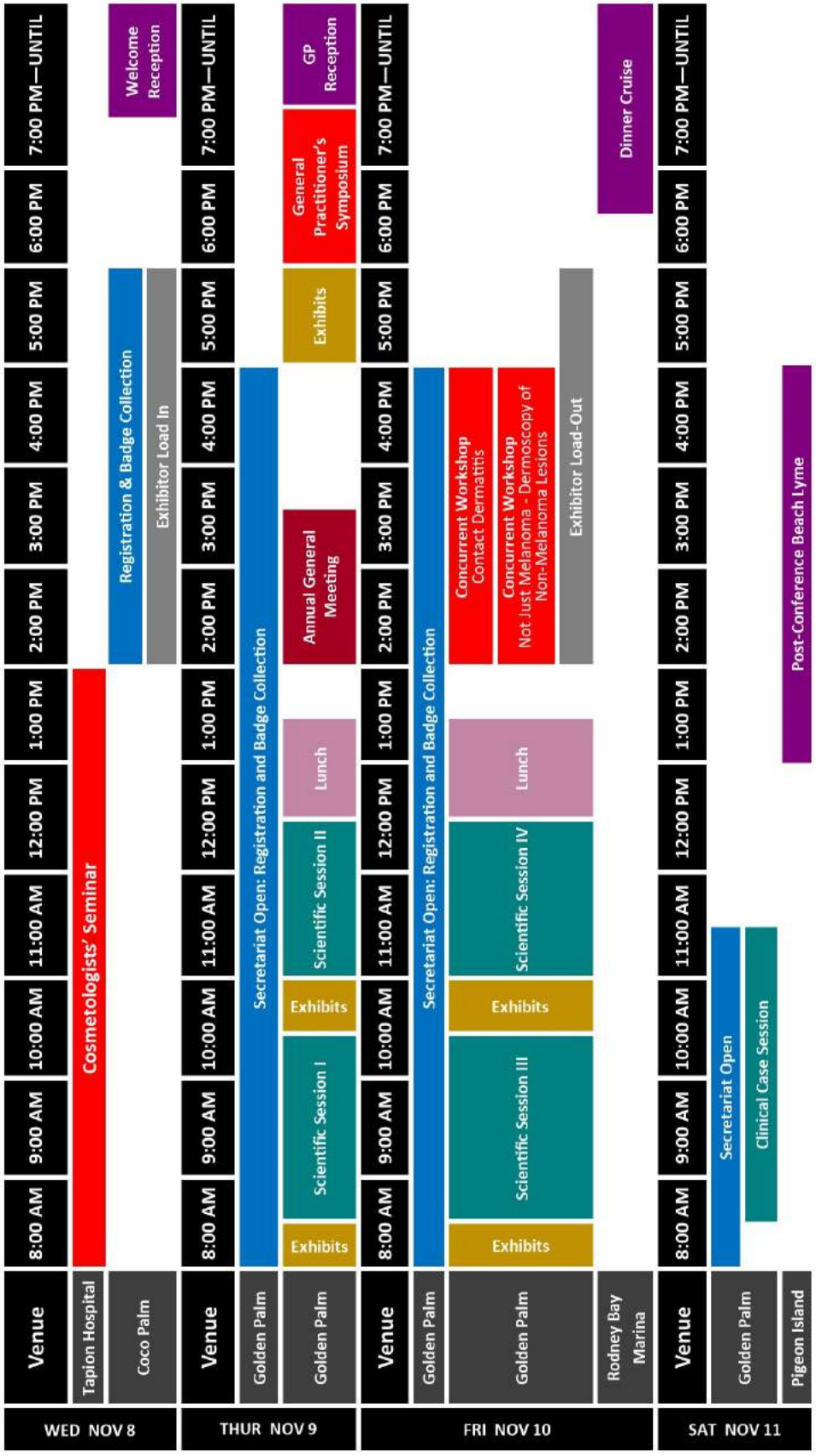
Acne & PIH After 3 Tx
Michelle Henry, MD

aerolase®
reinventing medical lasers

www.aerolase.com | (914) 345-8300 | information@aerolase.com

©2017 Aerolase Corporation. All rights reserved. Aerolase, its logo and LightPod Neo are trademarks or registered trademarks of the Aerolase Corporation.

SCHEDULE AT A GLANCE



THE "APPLE" AWARD

The Professor Hywel Williams Research Prize, fondly referred to as The "Apple" Award, was given to the **Caribbean Dermatology Association** by Professor Hywel Williams (Nottingham, UK) in 2000, when he was our Guest Speaker.

The prize is awarded at the end of the Annual CDA Conference to the presenter of the best original research paper with the greatest relevance to the Caribbean.

Past Awardees

2000	Dr. Michael Fitz-Henley
2001	Dr. Michael Fitz-Henley
2002	Dr. Suleman Bhamjee
2003	Dr. Althea East-Innis
2004	Dr. Morgan Basanta
2005	Dr. D. Thompson
2006	Dr. Michael Fitz-Henley
2007	Dr. Doris Joseph
2008	Dr. Suleman Bhamjee
2009	Not awarded
2010	Dr. Sandra McLeod
2011	Dr. Neilia-Kay McGill
2012	Dr. Sean Bullen
2013	Dr. Marilyn Suite
2014	Dr. Jeffrey Edwards
2015	Dr. Kyjuan H. Brown
2016	Dr. Althea East-Innis

CONFERENCE SCHEDULE

Wednesday 8th November

2.00pm - 6.00pm	Arrival/Check-in/Registration
6.00pm - 8.00pm	CDA Executive Committee Meeting

Welcome Reception
7.30pm - 9.30pm

Thursday 9th November

7.00am - 8.00am	Breakfast	
8.00am - 8.40 am	**EXHIBITS OPEN**	
8.40am – 8.45am	Welcome	Local Organizing Committee

Scientific Session I
8.45am - 10.35am

Chairperson: Dr. Blondell Durant

8.45-9.00	Platelet Rich Plasma in Dermatology **#004**	Dr. Arusha Campbell-Chambers *Jamaica*
9.00 - 9.15	High Dose Daflon in the Management of Chronic Venous Leg Ulcers **#014**	Dr. Sandra McLeod *Jamaica*
9.15 – 9.30	Daylight Photodynamic Therapy: The Cayman Islands Experience **#005**	Dr. Rebeca De Miguel Madurga *Cayman Islands*
9.30- 9.40	**DISCUSSION**	
9.40- 10.10	Innovations in Dermatologic Treatments and Skin Rejuvenation **#009**	Dr. Rachael Eckel **ZO Skin Health Sponsored Lecture**
10.10 – 10.25	HTLV-1 Co-Infection Among HIV Infected Patients Attending a Large HIV Treatment Centre in Trinidad **#011**	Dr. Jeffrey Edwards *Trinidad and Tobago*
10.25 – 10.35	**DISCUSSION**	

10.35 - 11.10	**Coffee Break and Viewing of Exhibits**	

Scientific Session II **Chairperson: Dr. Maria Gonzalez**
11.15am – 12.30pm

11.15 – 11.30	Discoid Lupus Erythematosus: An Analysis of Risk Factors for Progression to Systemic Lupus Erythematosus **#008**	Dr. Althea East -Innis *Jamaica*
11.30 - 12.15	The Vulval Clinic **#017**	Dr. Natalie Stone *United Kingdom*
12.15- 12.30	**DISCUSSION**	

Lunch
12.30pm - 1.45pm

Annual General Meeting (*Open to all CDA Members*)
2.00pm - 3.30pm

General Practitioner's Meeting **Chairperson: Dr. Adela Lalsingh**
6.00pm - 8:30pm

5.00 - 6.00	**EXHIBITS OPEN**	
6.00 - 6.02	Welcome	Dr. Richard Desnoes **CDA President**
6.02 - 6.05	Prayer	
6.05 - 6.10	Greetings	Ministry of Heath Representative
6.10 - 6.30	Scabies	Dr. Marilyn Suite *Trinidad and Tobago*
6.30 -6.50	Tinea Capitis	Dr. Donna Thompson (TBC) *United Kingdom*
6.50 – 7.00	**QUESTIONS AND ANSWERS**	
7.00 – 7.20	Albinism	Dr. Keturah Edwin (TBC) *St. Lucia*
7.20 – 7.40	Skin Signs of Collagen Vascular Disease	Dr. Naomi Dolly *USA*
7.40 – 8.00	Topical Steroids: Use, Abuse and Misuse	Dr. Richard Desnoes *Jamaica*
8.00 – 8.10	**PANEL DISCUSSION**	
8.10 - 8.15	Vote of Thanks	Dr. Marie Grandison-Didier

Cocktail Reception
8.35pm - 10.00pm

Friday 10th November

7.00am - 8.00am	Breakfast	
8.00am - 8.30am	Exhibits open	

Scientific Session III **Chairperson: Dr. Alison Duncan**
8.30am – 10.30am

8.30 - 8.45	Confluent and Reticulate Papillomatosis: A Barbadian Perspective **#001**	Dr. Suleman Bhamjee *Barbados*
8.45 - 9.00	Skin Conditions Associated with Obesity: Is CRP a Legitimate Contender? **#012**	Dr. Michael Fitz-Henley *Jamaica*
9.00 – 9.15	Neurological disorders **#002**	Dr. Nicola Briand *Martinique*
9.15- 9.25	**DISCUSSION**	
9.25 -9.40	Melasma **#015**	Dr. Neil Persadsingh *Jamaica*
9.40 – 9.55	Re-Thinking the Medical Management of Keloids **#019**	Dr. Patricia Yap *Jamaica*
9.55 – 10.10	The First Reported Case of Merkel Call Carcinoma in Trinidad and Tobago **#007**	Dr. Kavita Deonarine *Trinidad and Tobago*
10.10 – 10.25	Updates on the Viral Pathogeneses of Merkel Cell Carcinoma and Trichodysplasia Spinulosa: New Possibilities for Diagnostics and Therapeutics **#018**	Dr. Stephen Tyring *USA*
10.25 – 10.35	**DISCUSSION**	
10.35 – 11.15	**Coffee Break and Exhibits**	

Scientific Session IV **Chairperson: Dr. Jeffrey Edwards**
11.15am – 12.30pm

11.15 -11.55	What's New in Hidradenitis Suppurativa?	Dr. Alberto Lavieri *Argentina* **Abbvie Sponsored Lecture**
11.55 – 12.10	Mitigating Against Inflammation Through Detoxification **#016**	Dr. Gilbertha St. Rose *St. Lucia*

12.10 - 12.25	Chronic Urticaria: A Case of Micro-Nutrient Deficiency **#003**	Dr. Sean Bullen *Barbados*
12:25 - 12:35	**DISCUSSION**	

Lunch
12.35pm – 1.45pm

Concurrent Workshops *(Separate Registration Required)*
2.00pm - 4.00pm

2.00 – 4.00	Not Just Melanoma: Dermoscopy of Non-Melanoma Lesions	Dr. Maria Gonzalez *United Kingdom*
	Contact Dermatitis	Dr. Natalie Stone; Dr. Donna Thompson *United Kingdom*

Dinner Cruise
Dress: Casual

Saturday 11th November

7.00am - 8.00am	Breakfast	

Clinical Case Session **Chairperson: Dr. Marie Grandison-Didier**
8.30am -12.00pm

8:30 - 8.40	A Fatal Case of Lucio's Phenomenon From Trinidad **#006**	Dr. Kavita Deonarine *Trinidad and Tobago*
8.40 – 8.50	Two Fungal Infections in a HIV Positive Patient? **#010**	Dr. Jeffrey Edwards *Trinidad and Tobago*
8.50 - 9.05	Interesting Cases From the Dermatology Association of Jamaica 2017 **#013**	Dr. Michael Fitz-Henley *Jamaica*
9.05 – 9.20	Clinical Cases From Bustamante Hospital For Children	Dr. Andrea Clare Lyn-Shue *Jamaica*
9.20 – 9.30	**DISCUSSION**	
9.30- 10.30	**Live Cases**	
10.30- 10.45	**Coffee Break**	
10.45- 12.00	**DISCUSSION**	

CONFERENCE ABSTRACTS

#001

TITLE: Confluent and Reticulate Papillomatosis: A Barbadian Perspective
AUTHOR (S)*:* Suleman Bhamjee
Submitted for: Research

ABSTRACT BODY:
Confluent and Reticulate Papillomatosis (CRP) has been reported as being rare in several parts of the world, including the United Kingdom. It has undergone a variety of terminologies, and has been confused with a number of dermatological entities. It has also been associated with Acanthosis Nigricans, obesity and insulin-resistance.

Several of our Jamaican colleagues have shown that CRP is more common in our region, than has been reported in some of our standard comprehensive dermatology reference textbooks. Therefore the need for further research and documentation is crucial in our understanding of this condition.

This study reviews the cases seen in a private office over several years, with a view to establishing a correlation with regional dermatologists.

#002

TITLE: Cutaneous Manifestations of Neurological Diseases
AUTHOR (S)*:* Nicola Briand
Submitted for: Medical Dermatology

ABSTRACT BODY:
Having dermatologists involved in the treatment of neurological disorders may contribute to better examination of neurological diseases and improve differential diagnosis.

This presentation reviews a few of the more essential disorders, and those with recent progress in diagnosis, management and/or treatment.

Emphasis will be placed on the most commun neurocutaneous syndrome, neurofibromatosis type 1 (NF1). The dermatologist can be involved not only in diagnosing NF1 and differentiating it from other similar disorders but also in treating the skin manifestations and following-up with patients.

#003

TITLE: Chronic Urticaria: A Case of Micro-Nutrient Deficiency
AUTHOR (S)*:* Sean Bullen
Submitted for: Medical Dermatology

ABSTRACT BODY:
Chronic urticaria can be quite disabling, impacting negatively on one's quality of life. It affects performance at work and school and, as such, is part of the group of severe allergic diseases. Though less common than acute urticaria, it affects 2-3% of the population over a lifetime. Defined as the presence of recurrent spontaneous wheals occurring on a regular basis for more than six weeks, chronic spontaneous urticaria is the most common presentation seen. Autoimmune disease with the presence of functional autoantibodies, is the most common identifiable cause of chronic urticaria. Chronic infections, auto-reactivity, food and drug intolerance, account for the remainder. As greater understanding of the immune system and its dysregulation unfolds,

micronutrient deficiency is being recognized as contributory to the development of chronic urticaria. Diagnostic evaluation for chronic urticaria though presently absent from current guidelines ought to include screening patients for these deficiencies. We present a case of a young adult with a 6-year history of chronic spontaneous urticaria and dermatographism presenting with reduced micronutrient levels which resolved on therapeutic replacement.

#004

TITLE: Platelet Rich Plasma in Dermatology
AUTHOR (S): Arusha Campbell-Chambers
Submitted for: Laser and Cosmetic Surgery

ABSTRACT BODY:
Platelet Rich Plasma (PRP) is an autologous high concentration of human platelets in a small volume of plasma. When activated, platelets release glycoproteins and growth factors to initiate wound healing.

This treatment involves the collection of blood which is anti-coagulated with citrate dextrose, then spun down using a centrifuge to separate out the plasma and platelet portion. Some systems use a separator gel as a special filter.

PRP is safe, natural and non-toxic. It has a strong safety profile, and is convenient with a short recovery time and significant long term results.

PRP has a wide range of uses and benefits and can be safely combined with other procedures. Its dermatologic uses, which are currently off label, include skin rejuvenation, scars, stretch marks, alopecia (especially androgenic alopecia), fat grafting and wound healing e.g. diabetic foot ulcers. PRP is FDA approved for use in orthopaedics, such as bone grafts. It is also used for pain management and sexual dysfunction.

Clinical studies have shown benefit in treating a number of these conditions. As with other treatments with a wide variety of benefits and limited robust studies, it has been met with skepticism by some physicians. However many PRP treatment providers and patients agree that it is more than just hype and do attest to seeing impressive results.

There is great variety in PRP study designs, PRP preparation, amount used and no. of treatments. Future studies are needed on this exciting treatment modality to further establish its roles in our treatment armamentarium.

#005

TITLE: Daylight Photodynamic Therapy: The Cayman Islands Experience
AUTHOR (S)*:* Rebeca de Miguel Madurga
Submitted for: Medical Dermatology, Research, Other

ABSTRACT BODY:
Background

Daylight photodynamic therapy (PDT) has been approved as one of the first line treatments for multiple actinic keratosis and the field of cancerization. This modality is a safe and pain free procedure, more convenient for the patients.

Objetive

To evaluate retrospectively the efficacy and tolerance of this modality of treatment in the Caribbean with 5-aminolaevulinic acid (Amelux) as the photosensitizer.

Methods

Review the 51 patients that were treated in our Clinic since January 2016 to July 2017 with a total of 119 treatments for multiple actinic keratosis (AK) on the face, and scalp. The AK were grade 1 and 2 in Olsen scale and were due to chronic sun exposition. After curettage, chemical sunscreen , the photosensitizer (Ameluz) was applied in the area for 30minutes of incubation. After that time, the patient was exposed to sunlight for 2 hours outside the clinic. The procedure was performed in all weather conditions but with rain. The patients were told to come back to the clinic after that time to have the photosensitizer removed and to have photographic documentation. Erythema was also evaluated visually the same day after PDT treatment using a four-point scale: 0, no visible erythema; (+), mild erythema; +, moderate erythema; ++, bright red erythema with induration.

Results

Most of the patients experimented a reduction on the number of actinic keratosis. All of them highlighted the cosmetical outcome. The erythema, desquamation and crusting were resolved in one or two weeks. Reduction in the photo actinic damage was also observed.

Conclusions

Daylight-mediated PDT is an efficacious and safe treatment for patient with large areas of chronic sun damage; it is more tolerable for the patients and has an excellent cosmesis. In the Caribbean our patient can easily be exposed to the proper daylight the whole year. Hence, Daylight PDT should be considered as an excellent option to treat our patients.

#006

TITLE: A Fatal Case of Lucio's Phenomenon From Trinidad
AUTHOR (S)*:* Kavita Deonarine
Submitted for: Dermatopathology, Medical Dermatology

ABSTRACT BODY:
A 42 year old female presented to the dermatology department in April 2015. Her initial biopsy report by a pathologist was consistent with a vasculitis. After extensive investigations and immunosuppression, the patient deteriorated and developed extensive cutaneous black-brown ulcerated lesions on the face, legs, trunk, pinnae of both ears and gluteal lesion. She also had fever, arthralgia and malaise.

She was reassessed clinically and a repeat biopsy read by a dermatopathologist in September 2016 showed an infiltrate of foamy macrophages, globi containing numerous lepra bacilli, and a neutrophilic infiltrate with vasculitis consistent with lepromatous leprosy. Slit skin smears done revealed a 5+bacterial index. She was started on multidrug therapy as per WHO recommendation. She died shortly after initiating therapy. This clinical and histopathological findings support a diagnosis of Lucio's Phenomenon which is rare in other parts of the world.

#007

TITLE: The First Reported Case of Merkel Call Carcinoma in Trinidad and Tobago
AUTHOR (S)*:* Kavita Deonarine
Submitted for: Dermatopathology

ABSTRACT BODY:
Merkel Cell Carcinoma is a rare malignant neoplasm with the potential for local reoccurence, spread to lymph nodes and distant metasases. This is the case of a 69 year old black male patient who presented with left ulcerated thigh mass. He had a biopsy excision. Histology and immunohistochemistry were consistent with Merkel Cell Carcinoma (MCC). MCC is very rare in black populations and this is the first reported case in Trinidad and Tobago.

#008

TITLE: Discoid Lupus Erythematosus: An Analysis of Risk Factors for Progression to Systemic Lupus Erythematosus
AUTHOR (S)*:* Althea East-Innis; Kaderina Stylianou, Alexandra Paolino, Kerry-Ann Clarke
Submitted for: Research

ABSTRACT BODY:
Discoid lupus erythematosus (DLE) is a scarring autoimmune disease of the skin, sometimes called chronic lupus erythematosus. Five to ten percent (5 - 10%) may progress to systemic lupus erythematosus (SLE). Some studies suggest that the distribution (photosensitive areas only versus generalized) or number of lesions may offer a clue as to whether the condition will progress to SLE.

This study was done on data from January 2002 to March 2015. Clinic and ward records were used to obtain a list of all patients seen as new patients in the dermatology clinic or admitted to the dermatology ward with diagnoses of DLE. Demographic data was obtained from all patients. Results of collagen vascular screens and skin biopsies were noted. Other cutaneous manifestations of lupus erythematosus were noted. Non-cutaneous organ involvement was recorded in those with SLE. The data obtained was analysed to try and identify underlying risk factors for those who progressed to SLE.

#009

TITLE: Innovations in Dermatologic Treatments and Skin Rejuvenation
AUTHOR (S)*:* Rachael Eckel
Submitted for: Other

ABSTRACT BODY:
Objectives

To heighten awareness of the Science of Skin Health- a concept introduced by Dr. Zein Obagi almost 40 years ago- and the many

issues related to skin treatments and procedures that dermatologists encounter on a daily basis. This lecture will further:

Share Dr. Obagi's cutting edge philosophies when treating skin to ensure safer, more effective outcomes that are long-lasting.

Address the latest cosmetic chemistry advancements in topical and chemical peels that allow for successful treatment and maintenance of common dermatologic conditions (e.g. melasma, acne, rosacea, UV damage).

Introduce new treatment protocols and innovations in key procedures (e.g. peels, lasers, volume replacement, neurotoxins).

Focus on ethnic skin and how to eliminate strategic obstacles that can hinder cutaneous results.

Methodology

Comprehensively address 7 critical skin concepts through comparative analysis, clinical observations, patient treatment, and progress evaluation. When these elements are holistically addressed during treatment, the results are infinitely superior to any program that myopically focuses on amelioration of a single problem or symptom. These factors include:

- Barrier function (tolerance, sensitivity)
- Hydration (dry, normal)
- Color (even, uneven)
- Contour (firmness, tightness, deflation, laxity)
- Texture (intact, smooth, damaged, rough)
- DNA repair (photodamage, recurrence of skin cancer and pre-cancers)
- Chronic inflammation (acne, rosacea)
- Skin's renewal ability (active, dormant)

Conclusions

It is imperative that skincare clinicians recognize the advancements in dermatologic science over recent decades. Knowledge and skillset must be updated through use of evidence-based treatments that generate unrivalled results.

#010

TITLE: Two Fungal Infections in a HIV Positive Patient?
AUTHOR (S)*:* Jeffrey Edwards; Selena Todd, Gregory Boyce
Submitted for: Medical Dermatology

ABSTRACT BODY:
A 22 year old female, known HIV infection for the past 6 years who defaulted from care presented to hospital with fever, weight loss, skin rash, cough and shortness of breath. There were reddish brown papules on the limbs clinically suggestive of histoplasmosis. CXR was suggestive of PCP and blood investigations demonstrated pancytopenia. HAART was restarted and the patient was treated with itraconazole and co-trimoxazole with good improvement. She subsequently developed severe headache, nausea and vomiting and the CSF india ink stain was positive for cryptococcus.

#011

TITLE: HTLV-1 Co-Infection Among HIV Infected Patients Attending a Large HIV Treatment Centre in Trinidad
AUTHOR (S)*:* Jeffrey Edwards
Submitted for: Medical Dermatology

ABSTRACT BODY:
The Medical Research Foundation is the largest Care and Treatment Centre for HIV infected patients in the English speaking Caribbean with over 8,500 patient enrolled in care. HIV-1/HTLV-1 co-infection is associated with more rapid progression to AIDS and worse outcomes of opportunistic infections associated with HIV. A review of HIV-1/HTLV-1 co-infected patients attending the clinic is currently being carried out and the clinical manifestations (including the dermatologic and HTV-1 associated conditions) and immunologic characteristics will be described.

#012

TITLE: Skin Conditions Associated with Obesity: Is CRP a Legitimate Contender?
AUTHOR (S)*:* Michael Fitz-Henley;
Submitted for: Medical Dermatology, Research

ABSTRACT BODY:
There have been several lists of the various dermatological conditions associated with obesity. It is planned to present a compilation of these conditions and the evidence which validates their association with obesity.

Confluent and Reticulate Papillomatosis (CRP) is a condition which the medical literature still lists as being rare. We have already presented data at previous CDA meetings demonstrating that the condition is not that rare in Jamaica and colleagues in the Caribbean support that fact from their personal experiences in their own home countries as well. CRP is also known to be associated with Acanthosis Nigricans (AN). AN is well known to be associated with Obesity.

We plan to look at the patients seen in 2017 with CRP and measure their BMI. This data will then be analyzed to see if CRP, with or without AN, should be a legitimate contender to be associated with an elevated BMI and/or obesity.

#013

TITLE: Interesting Cases From the Diabetes Association of Jamaica 2017
AUTHOR (S)*:* Michael Fitz-Henley;
Submitted for: Medical Dermatology

ABSTRACT BODY:
The Dermatology Association of Jamaica has quarterly meetings. Interesting cases are often seen and presented.

A few of these selected cases will be shared with the CDA along with any pearls gathered and the differential diagnoses. The hope is that help or advice can be gathered from CDA members where needed and the cases may be of some benefit to us all.

#014

TITLE: High Dose Daflon in the Management of Chronic Venous Leg Ulcers
AUTHOR (S)*:* Sandra McLeod;
Submitted for: Medical Dermatology

ABSTRACT BODY:
Experience of The Dermatology Department NCH/KPH with the use of High Dose Daflon is presented. High dose Daflon as adjuvant therapy in Chronic Venous leg ulceration and Lymhpoedema has resulted in increased healing rates in select patients.

#015

TITLE: Melasma
AUTHOR (S)*:* Neil Persadsingh
Submitted for: Medical Dermatology

ABSTRACT BODY:
A review of this disease and an assessment of the protocols used to treat this disease. The importance of the dialogue with the patient, please stress that this is a chronic disease but that it rarely persists beyond the menopause. The realization that visible light may be one of the triggers for melasma and the emergence of blockers to visible light both topically and oral preparations. The importance of using Hydroxy Quinone properly, and to educate the patients that the continuous use of Hydroxy Quinone will result in a plateau effect and a fall off in effectiveness.

The use of Non-Hydroxy Quinone products in treating melasma and the use of oral antioxidants in melasma. The importance of using Hydrocortisone in treating melasma. Finally the physical modalities which are used to treat melasma eg. chemical peels, micro dermabrasion, micro needling, micro needling with platelet enriched plasma and the use of lasers to treat melasma.

#016

TITLE: Mitigating Against Inflammation Through Detoxification
AUTHOR (S)*:* Gilbertha St. Rose
Submitted for: Medical Dermatology

ABSTRACT BODY:
Thousands of chemicals are added to food, air and water. Plants are sprayed with toxic chemicals, animals are injected with potent hormones and antibiotics. Heavy metals, are by-products of industry. Radiation, drugs, alcohol, perfume, infections, and stress are rampant. The digestion of protein also creates toxic by-products in the body. These toxins have become almost unavoidable. They are primary causes of inflammation.They can also affect the body's immune system.

Many dermatological conditions have an underlying inflammatory component. Common conditions like eczema, psoriasis; auto immune disorders like systemic lupus erythematosus and some chronic infective conditions have the underlying deficiency of the immune system with or without overload of toxins in the body.

Detoxification is a concept in complementary medicine, based on the principle that illnesses can be caused by the accumulation of toxic substances (toxins) in the body. The body has natural methods of detoxification. The liver is the principle organ of detoxification, assisted by the kidneys, intestines, skin, and lungs. Detoxification therapies work to activate and assist the body's own detoxification processes. Fasting is one of the quickest ways to promote the elimination of stored toxins in the body. Only the liver can purify the bloodstream by removing toxic compounds, micro-organisms, breaking down or transforming substances, so that they can be excreted.

Herbal formulas are used for detoxification and immune strengthening. Colonics may be used to cleanse the lower intestines. Chelation therapy is used by detoxification specialists to rid the body of heavy metals. Sweating therapies can also detoxify the body. Spiritual and /or emotional cleansing may need to be done. The rate and method of detoxification must be tailored for the particular disease condition being treated, to avoid possible side effects.

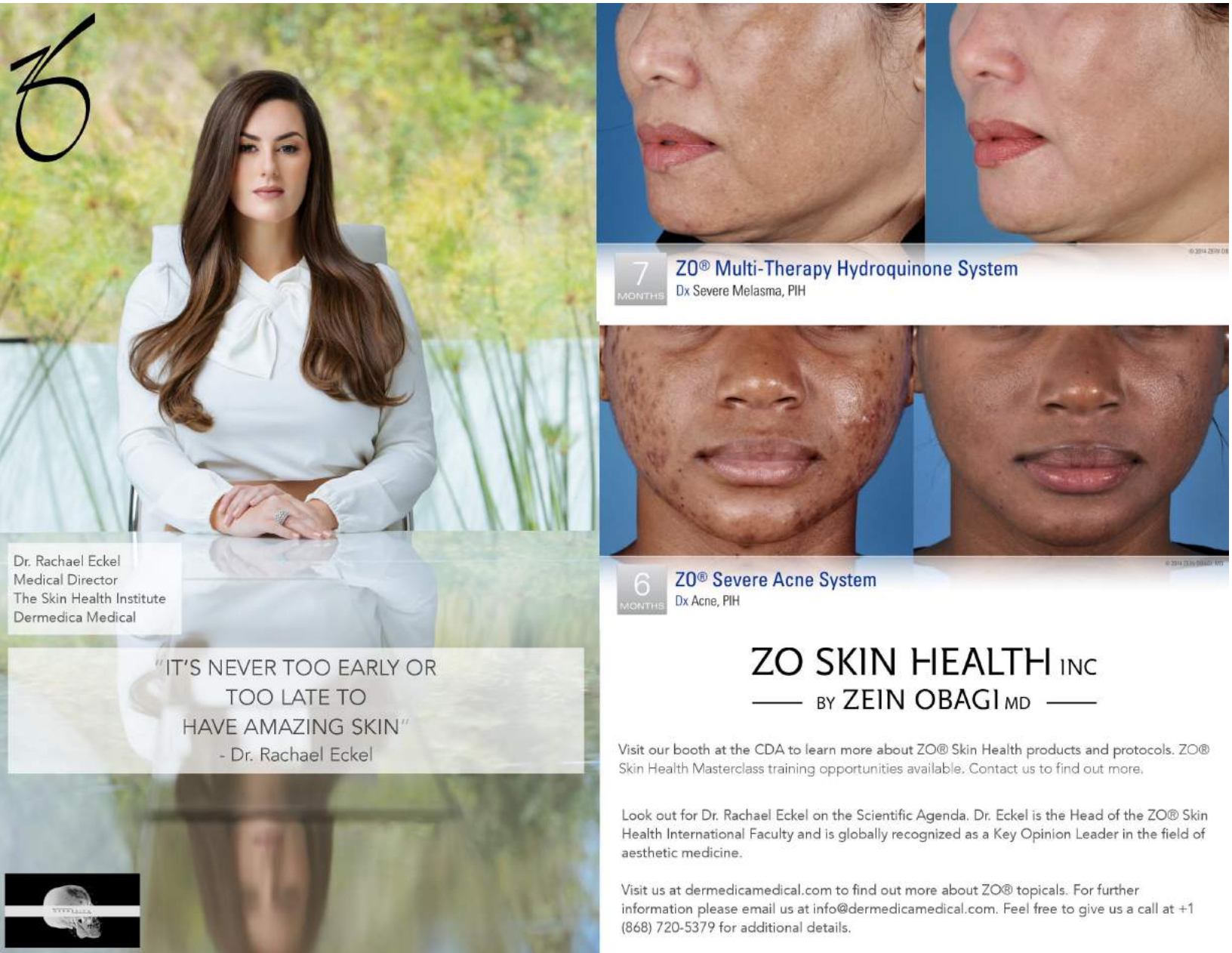
#017

TITLE: The Vulval Clinic
AUTHOR (S)*:* Natalie Stone;
Submitted for: Medical Dermatology

ABSTRACT BODY:
I have entitled my talk 'The Vulval Clinic' as I will use a series of images taken during our regular joint vulval/gynaecology clinic to demonstrate the routine and more complex patients that I have seen in this setting.

I will divide the patients into the different diagnoses that are commonly seen including lichen sclerosus, lichen planus, eczema, psoriasis, ulcers, lesions and patients with vulval pain syndromes. Using examples I will discuss the initial diagnosis of these disorders and their management based on current guidelines and literature.

I will lastly discuss some more challenging cases and give a summary of my take home points for vulval disease management.



#018

TITLE: Updates on the viral pathogeneses of Merkel Cell Carcinoma and Trichodysplasia Spinulosa: New Possibilities for Diagnostics and Therapeutics
AUTHOR (S)*:* Stephen Tyring
Submitted for: Research

ABSTRACT BODY:
The Merkel cell polyomavirus (MCPyV) and trichodysplasia spinulosa-associated polyomavirus (TSPyV) are responsible for the development and progression of two hyperproliferative cutaneous diseases. While Merkel cell carcinoma (MCC) presents as a highly aggressive cancer, trichodysplasia spinulosa (TS) is characterized by uncontrolled inner root sheath cell proliferation that can result in severe disfiguration. Recently, studies have elucidated an important role for the small tumor (sT) antigen in the proliferative pathogenic mechanisms of MCPyV and TSPyV which likely underlie disease progression. Although sT antigens are capable of influencing cellular pathways, their mechanisms of action are not clearly defined. The current study was designed to further explore the proliferative potential of MCPyV and TSPyV sT antigens. Moreover, we aim to identify cellular pathways that facilitate diagnosis and therapeutic intervention for these two diseases.

Our results reveal that MCPyV and TSPyV sT differentially target a number of cellular pathways involved in the regulation of cell survival. Expression of TSPyV sT antigen resulted in enhanced activation of the MEK-ERK pathway as well as the deactivation of the pRb tumor suppressor. In contrast, presence of MCPyV sT antigen significantly correlated with increased stability of the mitotic 4E-BP1-Î´ isoform. Given that dysregulation of MEK-ERK, pRb, and 4E-BP1 are associated with tumorigenesis and hyperproliferation, our findings support an important role for sT-mediated cell regulation in MCC and TS. In summary, our data identifies 3 pathways that can be differentially targeted for the diagnosis and treatment of these two polyomavirus-associated diseases.

#019

TITLE: Re-Thinking the Medical Management of Keloids
AUTHOR (S)*:* Patricia Yap
Submitted for: Medical Dermatology

ABSTRACT BODY:
Keloids are nodular, firm, tender, movable, non-encapsulated masses of hyperplastic fibroblastic tissue, occurring in the dermis and adjacent subcutaneous tissue, usually after trauma, surgery, burns, or severe cutaneous disease such as cystic acne. They are more prevalent in individuals of African descent and are commonly seen in public and private practice, negatively impacting patients' physical and emotional wellbeing. Traditional treatments have largely relied on combinations of surgery, radiotherapy, chemotherapy and cryotherapy, in part reflecting the historic view of keloids as benign tumours. These treatments have relatively poor outcomes, often complicated by keloid regrowth after repeated attempts at removal. Medical management of keloids remains underutilized, so too has the use of medical treatments to prevent recurrence. In this presentation, we introduce the application and results of a novel topical treatment option which demonstrates objective improvements in clinical outcomes (reductions in the size, appearance and recurrence of keloids) with enhanced patient satisfaction. We invite referral of patients to ongoing prospective evaluation of this new approach.

FACULTY

Suleman Bhamjee
Graduated from the UWI …1989….MBBS
Did rotations as House Officer and Senior House Officer at the Queen Elizabeth Hospital……1989-1995
Diploma in Dermatology…St John's Institute of Dermatology/University of London… 1995-1996
Member of the Royal College of Physicians…..1997
International Fellow of the American Academy of Dermatology….1999
Consultant Dermatologist……Queen Elizabeth Hospital…..1999
Associate University Lecturer of the University of the West Indies…1999
Member of the Caribbean Association of Dermatology….1999-
Program Director of Caribbean Dermatological Association 1997-2010
President of the Dermatological Association of Barbados….2005
Elected as a Fellow of the Royal College of Physicians….2006
President and Founder of the Dermatological Institute of Barbados 2007
Author of Pigmented Dermatology…a quick reference…2007
Author of Healthier Skin...2010
Awarded "The Philip Sherlock Distinguished Lecture" for Outstanding Contributions to Dermatology in the Caribbean 2017

Hobbies
Reading, swimming, running, exercise/gym, travelling, music
Lay Preacher

Nicola Briand graduated from the School of Medicine at the University of Hambourg in Germany where she also completed her residency in Dermatology in 2003. She did her postgraduate fellowship in skin biology at the University of Paris. Since 2008 she has been a staff physician at the Dermatology Departement of the University Hospital of Martinique and since 2014 site principal investigateur of the french Neurofibromatosis Network in Martinique. She is a member of the French Society of Dermatology and the President of the Dermatology Association of Martinique.

Sean E. M. Bullen is a graduate of the University of the West Indies Jamaica, Faculty of Medicine, who later specialised in Paediatrics at the University of Miami/Jackson Memorial Hospital in Florida. Dermatological training followed at St.John's Institute of Dermatology, Kings College London, where he was awarded a Post Graduate Diploma in Dermatology with Distinction. His most recent achievement is a Masters of Science Degree in Allergy from the University of Southampton, UK.

Dr. Bullen is a Board Certified Diplomate of the American Board of Paediatrics, Fellow of the American Academy of Paediatrics and Member of the Caribbean Dermatology Association. He serves as Consultant Paediatrician and Dermatologist with special interest in Allergy and is committed to full-time private practice.

He previously contributed to several presentations at the annual CDA Conferences and was the recipient of the Apple Award for original research relevant to the Caribbean in 2012, for his study of 'The Incidence and Frequency of Food Allergy in Children with Atopic Dermatitis'.

He resides in Barbados with his wife of 27 years, Maria, and their two daughters, Danielle, 24 and Anisa, soon to be 17. Anyone who knows him personally would say that he is fanatical about tennis, sharing his Christian faith including Christian Medical missions in which he has served the people of Haiti on several occasions. He also enjoys languages, travelling and different cultures.

Dr. Arusha Campbell-Chambers was trained at the University of the West-Indies, Mona and the St. John's Institute of Dermatology, King's College London. She has achieved several awards and honours academically, and attained extensive training in Cosmetic Dermatology in the United Kingdom, the USA and the Caribbean.

She is an International Fellow of the American Academy of Dermatology and attained Board Certification in Aesthetic Medicine from the American Academy of Aesthetic Medicine. Dr. Campbell-Chambers is the current Vice-President of the Dermatology Association of Jamaica and is a member of several other medical and dermatological organizations. She works in her private practice, Dermatology Solutions Skin, Body & Mind Clinic and Institute in Montego Bay, Jamaica.

She is a regular contributor to the Jamaica Gleaner newspaper in her 'Skin, Hair and Nail Health' column, and has published articles in other newspapers, magazines and medical journals. Her special areas of academic interest include Cosmetic Dermatology and disorders affecting skin of colour. She established the 'Love the skin you're in' school campaign in Montego Bay, Jamaica in 2015.

Dr. Campbell-Chambers is passionate about empowering women. She co-founded the 'Arise and Blossom Women's Organization' and has led the 'Women of Influence Ministry' at her local church. She is happily married and has two daughters.

Andrea Clare-Lyn Shue graduated from St. John's Institute of Dermatology (London). She is currently Senior Dermatologist at the Bustamante Children's Hospital, and an Associate Lecturer at University of the West Indies, Mona, and a visiting Consultant Dermatologist to the Cayman Islands Hospital. She is also a Fellow of the American Academy of Dermatology.

Kavita Deonarine is a graduate of the Faculty of Medicine of the University of the West Indies. She completed her Masters in Dermatology with Distinction at Kings College in 2014. She also attained her Membership of the Royal Colleges of Physicians and her Speciality certificate in Dermatology. She then completed a fellowship in Dermatopathology at the Boston University Department of Dermatology from 2015-2016.

Richard Desnoes is a graduate of the University of the West Indies, Faculty of Natural Sciences (B.Sc. Hons 1987 Biochemistry & Zoology) and Medical Sciences (MB.BS. 1994). He obtained the Diploma in Dermatology at St. John's Institute of Dermatology (University of London, 1998). His clinical Dermatology experience was gained at the Dermatology Unit of the University Hospital of the West Indies where he worked full time for over ten years.

He is employed as a Dermatologist at the Cornwall Regional Hospital and an Associate Lecturer at the University of the West Indies. He is the current President of the Caribbean Dermatology Association and is a Past President of the Dermatology Association of Jamaica.

He is married to Marllyn and enjoys raising tropical fish.

Rebeca de Miguel is a Dermatologist and venereologist trained in Spain and working in the Cayman Islands for the last 6 years.

She has a PhD in Psoriasis (cum laude) and a Masters in oncological dermatology. One of her fields of expertise is skin cancer and the most common procedures and treatments such as mole mapping or photodynamic therapy. She also holds the board certification of the American Academy of Aesthetic medicine practicing multiple procedures such as botox, fillers, micro needling or laser. She is currently doing a master on alopecia and participating on an study on PRP and dutasteride injections on androgenetic alopecia.

She is member of the Caribbean Dermatology association, American Academy of Dermatology, European Academy of Dermatology, British Association of Dermatology Spanish Academy of Dermatology and American Academy of Aesthetic Medicine. She collaborates with the Cayman Islands Cancer Society and other organizations on promoting skin cancer prevention in the Cayman islands.

Naomi Dolly graduated from St. Joseph's Convent High School in Trinidad and Tobago. She enrolled in the Faculty of Medical Sciences at The University of West Indes on a Further Additional Scholarship from the Republic of Trinidad and Tobago. Her successful completion of Medical School with multiple distinctions and honors in various modules, led to the strong foundation in starting her residency in dermatology in SUNY Downstate Medical Center, Brooklyn, New York. She has also completed fellowships at NYU Medical Center in advanced medical dermatology and dermatopathology at the Akerman Academy of Dermatopathology, New York.

Althea East-Innis obtained her MBBS degree from the University of the West Indies. After internship she worked for one year as a Resident at the Dermatology Unit of the University Hospital of the West Indies before proceeding to the United Kingdom to complete the Diploma in Dermatology from the Institute of Dermatology in London. She subsequently studied in Internal Medicine obtaining the MRCP (UK) and then Venereology obtaining the Diploma in Genito-urinary Medicine (Venereology). She returned to Jamaica in 1997 when she was appointed Consultant Dermatologist and Lecturer at the University of the West Indies. She is an overseas Fellow of the American Academy of Dermatology and recently obtained a Master of Science degree in Epidemiology from the London School of Hygiene and Tropical Medicine (University of London).

Her special areas of interest are: "hospital In-patient Dermatology" and "the epidemiology of dermatological diseases in Caribbean populations and how these diseases differ in presentation and behaviour in different ethnic groups". She has several publications in peer-reviewed journals including original research and editorials. She has held various executive offices including President of the Dermatology Association of Jamaica, Vice President and now Treasurer of the Caribbean Dermatology Association.

Rachael Eckel is an Award winning Cosmetic Dermatologist, global Key Opinion Leader, innovative researcher, multi-published author, international clinical educator, a virtuoso in nonsurgical facial rejuvenation, and pre-eminent leader in medical aesthetics.

A native of Trinidad and Tobago, Dr. Eckel completed her medical training at the prestigious Royal College of Surgeons in Ireland. She graduated from her program with Honours, and accrued six revered first place medals for outstanding academic achievements.

Dr. Eckel began her career in dermatology through the eminent St. Bartholomew's and the London School of Medicine, where she received a distinction in her dissertation on leprosy and its history in the Caribbean. She further completed her American Board Certification in aesthetic medicine, graduating first in her class. Through her excellence, Dr. Eckel was nominated onto this academy's Faculty; to teach and examine physicians worldwide in skincare and cosmetic medicine advances. Dr. Eckel remains the youngest doctor to ever achieve such esteemed membership.

Dr. Eckel has participated in several international cosmetic dermatology fellowships, at world-renowned institutions including the University of California Los Angeles (UCLA), Harvard University, Oxford University, and Mount Sinai Hospital. Dr. Eckel has also privately trained under Dr. Zein Obagi and Dr. Rox Anderson, the most influential and respected clinicians in cosmetic medicine and laser technology. In doing so, Dr. Eckel has learned and perfected the most pioneering aesthetic techniques worldwide.

Dr. Eckel remains actively involved in scientific audit, research, and the development of pioneering products and techniques. She has authored numerous medical journal publications, and is frequently invited to speak at leading international aesthetic conferences on cutting-edge concepts in cosmetic dermatology. Dr. Eckel also lectures extensively worldwide and provides master class training to physicians, with a principal interest in topical skincare agents. Dr. Eckel is closely mentored by Dr. Zein Obagi, who personally nominated her to lead his venerable ZO® Skin Health International Faculty Board. Through her distinguished success, Dr. Obagi also selected her to edit his latest book.

This rare meld of elite aesthetic education, international expertise, and research innovation forged an award winning, pre-eminent global leader in cosmetic dermatology, Dr. Rachael Eckel.

Jeffrey Edwards is a graduate of the Faculty of Medical Sciences of the University of the West Indies (UWI) and has interests in in the fields of STI/HIV, Dermatology and Public Health. He is the Director of the Medical Research Foundation of Trinidad and Tobago (a large HIV Clinic), Chairperson of the Trinidad and Tobago Dermatological Society and is Coordinator of the Master of Public Health Programme at UWI St Augustine.

Keturah Edwin-Tobias obtained her medical degree from the Faculty of Medical Sciences, Cienfuegos, Cuba 2004. She completed the Masters in Clinical Dermatology from Cardiff University in 2010.

Dr. Edwin-Tobias headed the STI/HIV department for one year. Towards the end of 2011 she took up the post of Community Dermatologist, providing dermatology care to patients at various health care facilities including the main hospital and also runs a private practice.

Michael Fitz-Henley has been a Consultant Dermatologist and a Lecturer at the University of the West Indies since 1987 with a private practice at Dermatology Associates in Jamaica. He is a member of the Medical Association of Jamaica, The Dermatology Association of Jamaica, the CDA, The American Academy of Dermatology, International Society of Dermatology, American Society for Dermatologic Surgery, American Contact Dermatitis Society, Council for Nail Diseases, and the International Dermoscopy Society.

He is a founding fellow of the CDA and has been a Past President and Vice President. Up to 2016 he had delivered over 50 'documented' (possibly others) lectures/presentations at the annual CDA meetings apart from being a guest plenary speaker at the Canadian Dermatology Association and Surinam/Dutch meetings along with numerous other lectures in Jamaica and the Caribbean.

On 3 occasions he was the recipient of the Prof. Hywell Williams award (The Apple) at the CDA for research relevant to the Caribbean. In 2014, the CDA gave him an award in recognition of his service in Continuing Medical Education in the Caribbean. He was featured as a VIP (Very Important Pelican) in his UWI alumni magazine. He still favours medical dermatology but has special interests in dermatologic surgery. He has been married for 37 years with one wife and three children.

Maria Gonzalez has worked exclusively in the field of Dermatology for the past 22 years. During this period she divided her time between academic work at Cardiff University and clinical work at the University Hospital of Wales. Here she distinguished herself as a leader and innovator in the teaching of dermatology winning awards for her contribution to the field.

Dr. Gonzalez's areas of special interest include dermatologic surgery, laser surgery, treatment of pigmentary disorders, treatment of hair disorders, treatment of skin cancers and the management of acne and acne scarring. She also has an interest in cosmetic dermatology and has spoken widely and published on relevant cosmetic dermatology subjects.

Sandra McLeod is the consultant dermatologist at the Kingston Public Hospital and National Chest Hospital, Jamaica.

Neil Persadsingh did his MBBS at UWI, and his Diploma in Dermatology at St. Johns. He has published three books: Acne in Black Women; The Hair in Black Women; and Eczema in Kids of Colour.

Natalie Stone has been a Dermatology Consultant at Aneurin Bevan Healthboard (ABUHB), Gwent,Wales for 17 years and is currently the ABUHB Clinical Director for Dermatology. Her special interests are contact allergy, occupational dermatology and vulval dermatoses. She manages the patch testing service at ABUHB and runs a dedicated vulval clinic jointly with Gynaecology. She believes that a multidisciplinary approach to treating patients with vulval dermatoses leads to improved outcomes and increased quality of care for this, sometimes, neglected patient group.

Natalie is currently the Welsh representative and secretary of the British Cutaneous Allergy Society and is a member of the British Society for the study of Vulval Disease. She has written over 50 peer reviewed articles concerning her areas of interest and written chapters in 3 books. In her spare time she is a taxi driver for her 3 children, regular park runner, dog walker and would-be piano player.

Gilbertha St. Rose is an Integrative Health Care Practitioner, General Practitioner, Dermatologist, and Consultant Medical Herbalist. She is Chief Executive of Eden Herbs and President of the Caribbean Association for Plant Science, Industry, Commerce and Use in Medicine [CAPSICUM]. Dr. St. Rose is a member and sub-committee chairperson of the St. Lucia Allied Health Council and a member of the St. Lucia Medical and Dental Council.

Marilyn Suite is a graduate of the Faculty of Medicine of the University of the West Indies. Her post-graduate training in dermatology was obtained in Trinidad under Dr. David Quamina and at St. John's Hospital for Diseases of the Skin in the United Kingdom. She is a fellow of the Royal College of Physicians, Edinburgh.

Dr. Suite is a former consultant dermatologist at the Port of Spain General Hospital, Trinidad and former Specialist Medical Officer, Hansen's Disease Control Unit of the Ministry of Health Trinidad and Tobago but is now solely in private practice. She was an Associate Lecturer in Dermatology, University of the West Indies up to 2006 and more recently Associate Clinical Instructor II from 2012 to 2015. Between 2001 and 2016, she was a visiting lecturer to Cardiff University, Wales, where she lectured to students pursuing the Diploma and MSc in Clinical Dermatology (formerly Diploma in Dermatological Sciences).

Dr. Suite is a founding member of the Caribbean Dermatology Association and was its President from 1996 to 2002. She also served as Secretary from 1992 to 1994. She has been serving as Vice President since 2012. She is a past Secretary/Treasurer and past Chairperson of the Trinidad and Tobago Dermatological Society, a member of the International Society of Dermatology, an international fellow of the American Academy of Dermatology and is actively involved in the Lupus Society of Trinidad and Tobago.

Dr. Suite continues to contribute to medical education by delivering talks to medical practitioners and other medical professionals in Trinidad and Tobago and within the region and also educates the general public on dermatological conditions.

Donna Thompson is a graduate of the University of the West Indies faculties of Natural and Medical Sciences where she obtained Bachelor of Science (BSc.) and Bachelor of Medicine and Bachelor of Surgery (MBBS) degrees. She later graduated form the St. John's Institute of Dermatology/ University of London, obtaining a Master of Science (MSc) degree in Clinical Dermatology with distinction.

She is a member of the Royal College of Physicians of the United Kingdom and has obtained a Certificate of Completion of Training (CCT) in dermatology. She is currently working as a Consultant Dermatologist at The Birmingham Skin Centre (Birmingham, England, UK) where her subspecialty interests include Occupational and Contact Dermatitis, as well as Paediatric Dermatology .

Stephen Trying is a Clinical Professor in the Departments of Dermatology, Microbiology/Molecular Genetics and Internal Medicine at the University of Texas Health Science Center at Houston. Dr. Trying is former President of the Texas Dermatological Society (TDS) (2009 - 2010), and received the TDS Mentoring and Leadership Award (2014). He is board certified by the American Academy of Dermatology (AAD), and received the AAD Presidential Citation (2016).

He is a member of the Infectious Disease Society of America and the American Federation for Clinical Research. Dr. Trying is an Assistant Editor for the J Am Acad Dermatol, and sits on several editorial boards as well as serves as a reviewer for a number of journals including the N Eng J Med, Lancet, JAMA/JAMA Dermatol, J Infect Dis & Ann Intern Med.

A principal investigator for over 300 successfully completed clinical trials, Dr. Trying's research interests, include the therapy and prevention of various mucocutaneous diseases, especially those disorders with an infectious and/or immunological basis.

Dr. Trying is the author of over 800 journal articles and book chapters as well as ten books: "Interferon:Principals and Medical Applications"; "Human Papillomaviruses: Clinical and Scientific Advances"; "Mucocutaneous Manifestations of Viral Diseases"; "Antiviral Agents, Vaccines and Immunotherapiers"; "Mucosal Immunology and Virology"; "Tropical Dermatology"; "Clinical and basic Immunodermatology"; "Sexually Transmitted Infections, Herpesviridae & Human Papillomaviruses: Bench to Bedside". Dr. Trying received his undergraduate degree from Indiana State University of Texas Medical Branch, his doctorate from Texas Tech University and his MBA from Rice University.

Patricia Yap received her undergraduate degree with honors in Pure and Applied Chemistry and her Medical Degree from the University of the West Indies. She completed her advanced studies in Dermatology with Distinction at the prestigious King's College of London – St. John's Institute of Dermatology. She has been practicing dermatology for over 25 years.

While practicing as a dermatologist, she discovered that many products on the market were not effective in treating people of Afro-Caribbean descent. This led her to study to become a cosmeceutical formulator. She is collaborating with Dr Mark Lue to develop compounded prescription products for this group.