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The technical advances of the last century changed the understanding of the science of cutaneous physiology and pathology and the role of the dermatologist. The major challenges the international dermatologic community faces today are the lack of a common, logical, and accepted language within the specialty; long-accepted but questionable policies to advance academic careers; and the marginalization of dermatology. Methods for communicating and circulating data and ideas also have changed radically. The distribution of knowledge and essential/practical tools in different regions of the world is inequitable, and developing countries must cope with the challenges of high-impact skin diseases.

<b>Syphilis: The International Challenge of the Great Imitator</b>	191
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Syphilis is a systemic disease caused by the spirochete *Treponema pallidum*. The name of this ancient but pervasive infection is proverbial to health care providers. The worldwide recognition of this term, however, argues with the intricacy of the disease in addition to the diagnostic and therapeutic challenges that persistently affect the global control of syphilis up to the present. This article focuses on the varied presentations of the infection, earning the title the "great imitator." The article also tackles other significant concerns regarding this malady.

<b>International Exchange Programs in Dermatology: A Prescription for the Present, A Hope for the Future</b>	203
Dédée F. Murrell and Evangeline B. Handog	

Little has been written about the various types and availability of international exchange programs in dermatology. These opportunities comprise medical student electives, mentorships for dermatology residents, international residencies, and clinical and research fellowships. For qualified dermatologists, there are opportunities for teaching and volunteering in emerging countries and career-development visiting fellowships to academic centers and private practices to learn specific techniques or to focus on particular areas. Exchange programs in dermatology, although minimal now, soon may

be accessible to most dermatologists worldwide, thereby promoting the advancement of scientific and clinical dermatologic information. The tables summarize funding sources for these exchanges.

**Noncompliance with the World Health Organization-Multidrug Therapy Among Leprosy Patients in Cebu, Philippines: Its Causes and Implications on the Leprosy Control Program**

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Elsie R. Honrado, Veronica Tallo, Angelita C. Balis, Gertrude P. Chan, and Sang Nae Cho

The success of current World Health Organization (WHO) key strategy for leprosy elimination (ie, multidrug therapy [MDT] regimen) depends largely on the efficiency of health care delivery services and patient compliance. A high rate of noncompliance with this regimen has serious implications for the leprosy control program because it can set the stage for the emergence of drug resistance, eventually resulting in treatment failure and failure of the program. A community-based descriptive study using pretested interviews conducted in 12 leprosy endemic areas in Cebu, Philippines, showed that the noncompliance rate with the WHO-MDT regimen among 233 study subjects was 30%. The causes of noncompliance are drug-related, health care provider-triggered, or patient-induced, or some combination of these. Recommendations on strategic interventions to obviate the cause for noncompliance are presented.

**Dermatovenereology in the Post-Communist Era: Syphilis in Prague During 1999 to 2005**

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Ivana Kuklová, Martina Kojanová, Hana Zákoucká, Ruzena Pánková, Petr Velčevský, Zuzana Rozehnalová, and Jana Hercogová

This article presents a retrospective case-note review of patients diagnosed and hospitalized with acquired syphilis between January 1999 and December 2005 performed at the two Departments of Dermatovenereology in Prague. The syphilis epidemic in the Czech Republic between 1994 and 2001 now seems to be declining. The high rates of immigration from Eastern Europe, unprotected sex, and prostitution provide the basis for an epidemic of sexually transmitted infections. Early identification of infected individuals and high-risk population groups, adequate treatment, partner notification, and treatment of infected partners therefore is essential.

**Conversion Disorder: “An Adverse Reaction” to Watch Out For**

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Pearl Sherienne C. Legaspi and Ma. Luisa Abad Venida

A subject was enrolled in a multicenter, double-blinded clinical trial of ofloxacin-containing multidrug therapy for leprosy by the World Health Organization in 1992 and she developed multiple physical symptoms a few hours after taking the regimen. Physical examination and laboratory work-ups could not support a medical diagnosis and she was eventually dropped from the study. Decoding revealed that she belonged in the control group given the World Health Organization/multiple drug therapy-multibacillary regimen. In the course of treatment, she was diagnosed with conversion disorder and was subsequently treated with an antipsychotic.

**Poverty, Dignity, and Forgotten Skin Care: Dermatology in the Stream of Human Mobile Population**

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Aldo Morrone

Skin diseases represent the greatest public health care problem in all developing countries. Tropical diseases tend to cluster in poor populations and often are defined as “neglected” because the investments made to combat them seem negligible compared with the

massive amounts expended globally on the health problems of developed countries. After reviewing the worldwide situation, this article explains the principles of community dermatology and discusses the work of the San Gallicano Institute in Rome, which has developed a model for reducing the number of people suffering from dermatologic and other diseases and has established the first dermatologic hospital in Ethiopia.

### **Paracoccidioidomycosis**

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Marcia Ramos-e-Silva and Luciana do Espirito Santo Saraiva

Paracoccidioidomycosis is a fungal infection that is relatively common in Brazil, Venezuela, Colombia, Ecuador, and Argentina. Sporadic cases can also be seen in some other countries. It is caused by a dimorphic fungus, *Paracoccidioides brasiliensis*, which affects mainly the skin, lymph nodes, lungs, and oral, nasal, and gastrointestinal mucous membranes. Depending on the specific immunity of the host, the infection can assume many forms and affect single or multiple organs, eventually becoming a severe and even fatal disease. It is very important for dermatologists of all over the world to know about paracoccidioidomycosis because sometimes the disease only manifests many years after the individual has left the endemic area.

### **Nondermatophytic Filamentous Fungi Infection in South America—Reality or Misdiagnosis?**

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Regina Casz Schechtman

For the last 10 years, a steady increment in the diagnosis of nondermatophyte filamentous fungal infections has been observed. This trend also applies to the valuation of the medical mycology. It can be attributed, in part, to the increased concern of the population with the aesthetic aspect, the easiest access to health information, and the increased demand for specialized jobs. Moreover, increase in the diagnosis of new emerging fungi is also caused by the improvement of the diagnostic techniques available as well as the qualification and constant update of the professionals in medical mycology. Another relevant aspect is the valorization of medical mycology in the medical curriculum. Misdiagnosis can lead to treatment failures, because not all nail diseases are caused by fungi. Therefore, the importance of clinical diagnosis is strictly associated with laboratory results.

### **Skin Tuberculosis in Children: Learning from India**

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Gomathy Sethuraman, V. Ramesh, M. Ramam, and Vinod K. Sharma

Cutaneous tuberculosis in children is a major health problem in India. It accounts for about 1.5% of all the cases of extrapulmonary tuberculosis. Scrofuloderma and lupus vulgaris are the two most common forms of tuberculosis. However, the trend in the pattern of cutaneous tuberculosis is changing, as the tuberculid, lichen scrofulosorum, has become more common in recent years. Overall, the clinical patterns are comparable with adults. However, children can have widespread and severe involvement because many unusual and uncommon patterns are known to occur in children. Underlying systemic involvement is more common in children, compared with adults.

### **Teledermatology: How to Start a New Teaching and Diagnostic Era in Medicine**

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Elisabeth M.T. Wurm, Terri M. Campbell, and H. Peter Soyer

“Telemedicine” is defined as the use of telecommunication technologies for the exchange of medical information across distances. Applications include patient management as well as research and education. Teledermatology is a steadily growing category of telemedicine. This article presents general aspects of telemedicine, such as modes of data transmission, and practical applications with a special emphasis on their significance for teledermatology.

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