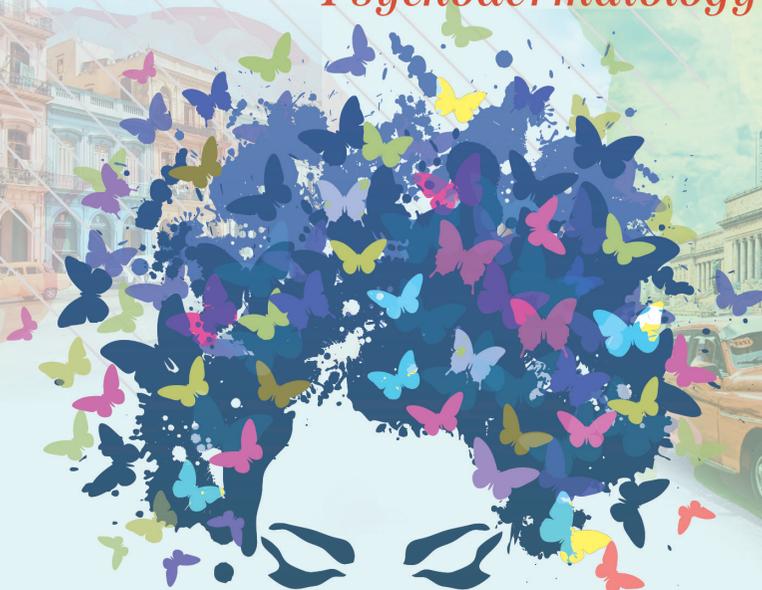




INDERCOS

Winter Meeting 2017

"Psychodermatology"



November 16-19, 2017
Havana- Cuba



November 16-19, 2017 / Havana- Cuba

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Winter Meeting 2017

Scientific Program

17 November 2017, Friday

08:30-09:00 Opening Ceremony

09:00-10:30 Joint Meeting with Cuban Vitiligo Support and Research Group

MsC Jorge Luis Perez Hidalgo

The Placental Histotherapy, a Cuban experience in the treatment of Vitiligo, Psoriasis and Alopecia

Dr. Ernesto Miyares Díaz

Cosmetic Amniotherapy, method to delay the aging and improve the quality of life

Dr. Ernesto Miyares Díaz

Meditation. An alternative treatment for Vitiligo and other skin disorders

MsC. Rafael Bestar Biset

The Interrelation Histotherapy-Dermatology in the Histotherapy-Placental Center

Dr. Isabel Caraballo Pons

The spirit of diseases as antecedents of Biological diseases

Prof. Victor Lazaro Betancourt

10:30-10:45 Coffee Break

10:45-12:00 APMNA Conference (Association for Psychocutaneous Medicine of North America)

10:45 - 11:10 Psycho Neuro Immune Endocrine System: Selected Choice

Prof. Dr. Torello Lotti

11:10 - 11:25 Excimer laser treatment of vitiligo

Prof. Dr. Meltem Önder

11:25- 11:45 The Interrelation Histotherapy-Dermatology in The Histotherapy-Placental Center

Dr. Isabel Caraballo Pons

11:45-12:05 Loneliness Satisfaction with life ad Internalized stigma in Psoriasis

Prof. Dr. İlknur Kıvanç Altınay

12:05-13:00 Break



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13:00-14:30 Oral Presentation Session-1

A descriptive study of stress and mental disease among patients with dermatological skin complaints, treated in HISTOTHERAPY-PLACENTARY CENTER

Dr. Isabel Caraballo Pons

Quality of life among patientes with vitiligo, psoriasis and Alopecia Areata, measured by Miller & Smith test of vulnerability

Dr. Isabel Caraballo Pons

14:30-14:45 Coffee Break

14:45-15:30 Oral Presentation Session-2

Clinical characteristics and prognosis of pemphigus

Dr. Hüseyin Cahit Ülker

15:30-16:30 Oral Presentation Session-3

Loneliness Satisfaction with life ad Internalized stigma in Psoriasis

Prof. Dr. İlknur Kıvanç Altınay

16:30-17:30 Oral Presentation Session-4

Radiotherapy in The Management of Classic Kaposi's Sarcoma: A Single InstitutionExperlence From North East Turkey

Dr. Mustafa Kandaz



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CLINICAL CHARACTERISTICS AND COURSE OF PEMPHIGUS

Dr. Hüseyin Cahit Ülker

Atatürk State Hospital, Dermatology Department, Antalya Turkey

Many factors affect the clinical course of pemphigus. At this study, we aimed to investigate the effects of factors other than the ones reported at literature, such as delay at diagnosis, compliance to follow ups, treatment protocols, site of lesion and site of lesion resistant to treatment, on clinical course of pemphigus.

A total of 61 pemphigus patients (mean age= 53.03 ± 13.86 ; F/M=1.2/1; follow up duration = 37.7 ± 32.2 months) who were followed at our clinics between the years 2005 and 2010, diagnosed by DIF, IIF and ELISA methods besides histopathological evaluation were included in the study. The effects of sociodemographical characteristics of patients, chronological localization sites of lesions, delay at diagnosis and compliance to treatment on clinical course were evaluated. Factors that may affect the development of resistant lesions, intensity of disease and remission were investigated and side effects of treatment and factors that may contribute to occurrence of these were evaluated. Levels of PDAI, VAS, Dsg1, Dsg3 were recorded at the time of diagnosis and at remission period.

It was observed that at patients who had an oral lesion as the onset lesion, recurrences and treatment-resistant lesions occurred mostly at mouth. At patients with PF, it was detected that patients who had onset lesions on their bodies had resistant lesions on their bodies as well. It was demonstrated that intralesional CS treatment added to CS treatment provided a decrease at VAS and oral PDAI scores, compared to CS treatment alone. It was observed that treatment-related side effects were more frequent at CS treatment. Besides osteoporosis was related to duration of CS use. It was observed that familial history of DM and high BMI increased the risk of treatment-related DM.

It was considered that compliance to follow ups may positively affect clinical course. It must be considered that treatment-resistant lesions and recurrences occur mostly at onset site of disease. Intralesional CS may be recommended additional to systemical CS, especially at treatment of oral lesions. The relation of osteoporosis development with duration of CS use, and DM development with familial DM history and BMI should be warning for detection and prevention of side effects.



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RADIOTHERAPY IN THE MANAGEMENT OF CLASSIC KAPOSI'S SARCOMA: A SINGLE INSTITUTION EXPERIENCE FROM NORTH EAST TURKEY Running title: RADIOTHERAPY IN THE MANAGEMENT OF CLASSIC KAPOSI'S SARCOMA

Mustafa Kandaz¹, Zümürüt Bahat¹, Ozan Cem Güler¹, Emine Canyılmaz¹, Mehmet Melikoğlu², Adnan Yöney¹

*Karadeniz Technical University, Faculty of Medicine, Department of Radiation Oncology¹
Atatürk University, Faculty of Medicine, Department of Dermatology²*

Background: Kaposi sarcoma is a rare adult neoplasm and there has been no certain consensus on standard treatment, either local or systemic. Radiotherapy is an effective, suitable treatment modality.

Patients and Methods: Between 1996 and 2016, patients who were diagnosed as Kaposi sarcoma and referred to our clinic for radiotherapy were included in this retrospective study,

Results: 92 patients were examined in total and it was diagnosed that all the patients had non-HIV associated Kaposi's sarcoma. There were 36 (39%) females and 56 (61%) males and female to male ratio was 2/3. Mean age at presentation was 68.78 ± 13.55 (30-93). 68 patients (77%) were treated with 8Gy (1 fraction), 15 patients (16%) were treated with 20Gy (2Gy/fraction), 4 patients (4%) were treated 25Gy (2.5Gy/fraction) and 5 patients (6%) were treated 30Gy (3Gy/fraction). The median follow-up time was 72 (5-192) months. The CR at 5 years was 92% with >20 Gy and 86.6% with 8 Gy.

Conclusions: Radiotherapy is an effective, suitable treatment modality of Classic Kaposi sarcoma and usually, radiotherapy is well tolerated with minimal side effects.

Keywords: Classic Kaposi sarcoma, Radiotherapy.



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LONELINESS, SATISFACTION WITH LIFE AND INTERNALIZED STIGMA IN PSORIASIS

İlknur Kıvanç Altunay¹, Kenyul Salaeva¹

¹Health Sciences University, Şişli Hamidiye Etfal Training and Research Hospital, Department of Dermatovenereology Istanbul, Turkey

Introduction & Objectives: Although not completely proven, psychosomatic origin is among generally recognized etiologic characteristics of psoriasis. Many psychiatric morbidities, which may be primary or secondary, have been reported in patients with psoriasis. The aim of our study is to evaluate the effect of psoriasis on the satisfaction with life, level of loneliness and internalized stigma which are considered to be directly influential on psychological well-being, and examine how these values may change through treatment.

Materials & Methods: Fifty patients with psoriasis who were aged 18 or above, volunteered to participate in the study and met the inclusion criteria were included in the study. The patients completed the socio-demographic data form, the UCLA Loneliness Scale (ULS), the Satisfaction With Life Scale (SWLS) and the Internalized Stigma of Mental Illness Inventory (ISMI) both before and 3 months after the treatment. All scores of these scales were compared each other before and after treatment. The patients were divided into three groups as mild, moderate and severe regarding the severity of the condition for which the Psoriasis Area and Severity Index (PASI) and the Dermatology Quality of Life Index (DLQI) were used. Statistical analyses were made by Student t tests, One Way ANOVA, Mann-Whitney U tests, Kruskal Wallis tests, Wilcoxon tests and Spearman Correlation analysis.

Results: Statistically significant changes were observed in the mean values of SWLS, ULS and ISMI scores in the pre-treatment term and thereafter. Statistically significant correlation was determined among all scales evaluated before and after the treatment. Statistically significant differences were observed in all scales evaluated before the treatment according to disease severity groups. Considering disease duration, the SWLS scores before the treatment were significantly lower in patients with a disease duration of >10 years whereas after the treatment, they were significantly lower than only those patients with a disease duration of <5 years. According to patient age, the SWLS scores after a treatment period of 3 months were significantly lower in patients with an onset age below 18 whereas the average of the ISMI scores after treatment were significantly higher.

Conclusions: Loneliness, satisfaction with life and internalized stigma are negatively affected in psoriasis patients. As the severity of the disease increases, satisfaction with life decreases and feelings of loneliness and internalized stigma increase. This results further highlights the fact that psoriasis is not merely a cutaneous condition that affects appearance but should also be addressed as a complex disease that impacts the psychological functioning of the patient. Our results show that families and physicians should be more sensitive about psychological support in the treatment planning, and the factors that affect these values should be extensively dealt with before and after the treatment.



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PSYCHODERMATOLOGY ADDRESSES THE INTERACTION BETWEEN MIND AND SKIN.

Dra. Isabel Caraballo Pons

Introduction: "The skin is our second placenta. "It reflects the varied emotions in which people are trapped."

A lot of researchers say Psychiatry is more focused on the "internal" nonvisible disease, and dermatology is focused on the "external" visible disease.

Dermatologists have stressed the need for psychiatric consultation in general, and psychological factors may be of particular concern in chronic intractable dermatologic conditions, such as eczema, prurigo, and psoriasis.³—

Psychodermatology, or psychocutaneous medicine, basically connotes approaching diseases of the skin through the mind, or at least factoring in the influence that mental health has on the onset, management, and recurrence of dermatologic diseases.

By analyzing the history of Psychodermatology, we have found very interesting and curious facts. Philosophers, surgeons, dermatologists, and psychiatrists, have long since reported the presence of psycho-cutaneous diseases in various scenarios.

Psychiatric patients also often present to dermatologists with secondary skin problems. Figures show (3) that mental illnesses affect an estimated 30 to 60% of dermatologic patients. In some cases, such as atopic dermatitis, there is an underlying predisposition to anxiety and depression. Obsessive-compulsive disorder often belies trichotillomania. Recently, preliminary findings from Gupta and colleagues demonstrated "a significant association of acne with [attention-deficit hyperactivity disorder]." In addition, there is a high rate of comorbid psychiatric disorders such as generalized anxiety disorder, depression, and phobic states among patients with alopecia areata.

The complex interplay between mind and body and the vicious cycle between mental and dermatologic disease are what psychodermatology aims to address. The understanding of the existence of a cycle, whereby psychological disturbances cause skin diseases and skin diseases cause psychological disorders, is the basis for good dermatologic practice; To what I would add, good medical practice

In all these years of work we have carried out a series of investigations aimed at characterizing the patient with Vitiligo, Psoriasis and Alopecia, their personality characteristics, factors or situations that are conducive to stress, as well as the quality of life of these patients before and after Of disease, self-esteem

Regarding the use of alternative treatments such as floral therapies, in the investigations carried out, we obtained satisfactory results in patients with these skin conditions, as in other diseases diagnosed as psychosomatic. Possibility of application at any age, but above all as Noble therapeutic resource, in children, senior adult and people with other associated diseases. As we know that many drugs used in psychiatry present secondary reactions at the level of the skin, which would worsen the course of the disease.

Brain Wave Synchronizer (Alternative Treatments) In the study we found 15.59% of the patients in the first session felt tense and expectant. Between the second-fifth session they begin to feel the effects of sedation, mainly drowsiness and the looser body.

We conclude that the greater number of sessions applied, the patients feel more sedation and the effect is prolonged over time.

Benefits

Safe Treatment.

Few contraindications.

Easy application.

No side effects, no adverse reactions.

No cost to the patient.

Possibility of application to more than one patient at the same time, under supervision.



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No:4 34360 Şişli - İstanbul - Türkiye

Tel :+ 90 212 381 46 00 pbx • **Fax**: + 90 212 258 60 78

e-mail: indercoswinter@figur.net