

Conference Report

Conference report: 8th Annual National Skin Allergy Meeting – India

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The Skin Allergy Research Society (SAS), with its area of operation all over India, was established in 2013 with an aim is to encourage evidence-based and ethical practice in the treatment of skin allergy disorders. The SAS organized its 8th Annual National congress – **Skin Allergy Meeting** on October 10, 2021. For the 1st time, this conference was held on an online platform due to the ongoing COVID-19 pandemic. Speakers presented new findings and highlighted recent trends and works in the discipline of skin allergy, both in India and globally.

The congress was spearheaded by Dr. Abhishek De, the dynamic organizing secretary, and ably assisted by other SAS executive members comprising Dr. Kiran Godse (President, SAS), Dr. Nidhi Sharma (Treasurer), Dr. Prabhakar Sangoli (SAS Academic Chairman), and Dr. Anupam Das (SAS Academic secretary).

Over 390 delegates joined in virtually from different parts of the country to update their knowledge on skin allergy, an important but nascent domain in the context of Indian dermatology. The topics selected were relevant and important in today's world, where patient care and clinical practice have been deeply impacted by the COVID-19 pandemic. The faculties shared their experience and wisdom to guide the fraternity through this troubled time and establish a sense of normalcy in their practices while ensuring adequate safety.

The highlights and salient points collected from this academic feast are being presented in this paper.

After a short inauguration, Dr. Sandipan Dhar delivered the “A.K. Bajaj” Oration. Incidentally, Dr. Dhar is one of the global leaders in the domain of atopic dermatitis, and late Prof. A.K. Bajaj considered the “father of contact dermatitis in India,” was his teacher. In this deliberation, Dr. Dhar highlighted his academic journey to become one of the global leaders in atopic dermatitis and inspired all the attendees.

This session was followed by a panel discussion on Atopic Dermatitis and Contact Dermatitis, moderated by Dr. Murlidhar Rajagopalan, a globally acclaimed Indian Dermatologist. In this session, Dr. Dhar discussed the various types of contact dermatitis affecting the pediatric age group. Dr. Rashmi Sarkar and Dr. Krupa Shankar shared their experiences concerning contact dermatitis and atopic dermatitis in Indian patients. Dr. Bela Shah stressed the rising incidence of systemic contact dermatitis (SCD) in India. The role of dietary prevention for contact dermatitis was debated among the panelists, and finally, they concluded that dietary restriction may be helpful in a subset of patients with SCD, but it should not be advocated routinely. Various interesting cases were discussed with atypical presentations and all panelists participated with their valuable inputs.

Following this, all viewers were treated to a riveting lecture on “Inducible urticaria” by Dr. Kanokvalai Kulthanam from Thailand, a global authority on this subject. She discussed the various types of inducible urticarias and their diagnostic procedures. This lecture was extremely helpful to all delegates, as inducible urticarias often remain undiagnosed and underreported in India due to the lack of diagnostic facilities at most centers. The speaker stressed the rising importance of inducible or physical urticarias, and we hope this lecture will raise awareness about this entity among Indian dermatologists. The next panel discussion on “How to manage Difficult to treat urticaria” intrigued all participants as all faculties divulged various tips and tricks to manage antihistamine-resistant urticaria. This session was ably moderated by Dr. Nidhi Sharma. Dr. Kiran Godse highlighted the role of various immunomodulatory therapies in chronic urticaria, not responding to the up dosing of antihistamines. Although all panelists agreed that omalizumab is the best option, its high price often limits its usage in India. Dr. Girdhar and D. Zavar stressed various less reported immunomodulators

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such as dapsons, azathioprine, and methotrexate which may be more suitable for Indian patients, due to their easy affordability, however, appropriate baseline investigations are necessary. The role of autologous serum therapy was also discussed as additional treatment in such cases, but opinions remained divided regarding its benefits. This session received maximum queries from the delegates which were answered by the faculties while some were resolved later over mails.

Dr. Sathish Pai discussed the tips and tricks of patch testing in the Indian context. He highlighted the procedure of patch testing including its reading and interpretation as per the international guidelines. He stressed the importance of delayed reading after 7 days, as many allergens may be missed if only a 48/72 h reading is obtained. He also cautioned about some of the common limitations of this test like false-positive or -negative results and angry back syndrome, and ways to circumvent them. This session was immensely beneficial to the young delegates, especially the postgraduate students.

The next session was the highlight of this congress, as recent updates in the international urticaria guideline were discussed by Dr. Luis Felipe Ensina from Brazil, one of the members of this guideline committee, along with Dr. Kiran Godse (President, SAS). The following updates were highlighted –

1. Serum immunoglobulin (Ig)E, serum anti-TPO IgG, and serum anti-TG IgG need to be evaluated in all chronic spontaneous urticaria (CSU) patients to determine the pathogenesis involved (low serum IgE with high anti-TPO/TG IgG is indicative of type IIb autoimmune pathogenesis). This information is vital for precision medicine, as type IIb CSU is poorly responsive to omalizumab and so cyclosporine and other immunomodulators should be administered in antihistamine refractory cases whereas type I CSU (high serum IgE) shows a favorable response to omalizumab.

Besides, type IIb CSU also shows a more prolonged course with a poorer prognosis compared to type I CSU

2. All patients should be assessed for urticaria activity (urticaria activity score), control (urticaria control test), and impact (chronic urticaria quality of life)
3. Updosing of omalizumab has been included in step II of the treatment algorithm for antihistamine refractory CSU.

Dupilumab is the latest monoclonal antibody being approved in atopic dermatitis, however, its use is still limited in India due to its exorbitant price. Dr. De is one of the prolific users of dupilumab in India along with Dr. Dhar. Hence, Dr. De presented their experience regarding the “real-world experience of dupilumab in India” in the next session. They found dupilumab to be extremely effective with minimal, reversible side effects such as conjunctivitis and injection site reactions. Dr. De advocated continuing treatment with dupilumab as these adverse effects can be neutralized easily.

In the next session, the winners of the “Allergy Quiz” were declared by the quiz masters, Dr. Das and Dr. Patil. A very captivating quiz was held on the previous night virtually, which saw the participation of several postgraduate dermatology residents across the country. The winners were felicitated and received attractive cash prizes. The organizers hope such activities would generate interest among the younger dermatologists concerning skin allergy. The congress ended with closing remarks and a vote of thanks by the organizing secretary.

To summarize, the virtual 8th Annual Skin Allergy Meeting 2021, organized by SAS, India, was a resounding success, with its interesting and lively discussions on relevant topics concerning skin allergy, thus increasing awareness about allergic disorders involving the skin.

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