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## Expression of caspases-8, 9 & 3 in vitiligo

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Vitiligo is a multifactorial polygenic disorder with a complex pathogenesis. The precise cause behind melanocyte destruction remains unknown. The epidermal melanocytes form a functional and structural unit with neighboring keratinocytes. The keratinocytes produce certain growth factors required for melanocyte growth and damage to keratinocytes may result in passive melanocyte death with the development of vitiligo. We performed this study to confirm the role of apoptosis in the pathogenesis of vitiligo through studying the expression of caspases-8, 9 & 3 and to determine the relation between the disease activity and the expression of these apoptotic markers. 20 skin biopsies were obtained from the edge of vitiligo lesion. Immunohistochemical staining for caspases-8, 9 & 3 was carried out. We demonstrated the expression of these apoptotic markers within both the epidermis and the dermal lymphocytes. We found that the expression of caspases-8, 9 & 3 was higher in depigmented epidermis when compared to normally pigmented epidermis either from vitiligo patients or from the normal control. The majority of apoptotic keratinocytes was found in the basal and suprabasal layers of epidermis. Regarding disease activity, the expression of these apoptotic markers was significantly higher in cases with active disease when compared to those with stable disease. Also, these apoptotic markers were expressed in the dermal lymphocytes. In conclusion vitiligo is not a disease limited to melanocyte death. Apoptosis of keratinocytes also clearly occurs and may play an important role in the development of the disease.

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## Guidelines on aesthetic medical practice for registered medical practitioners- sharing Malaysian experience

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Malaysia, like the rest of the world, recognizes an increasing interest and demand for aesthetic medical practice (AMP). To ensure public safety and to uphold professional standards, a set of guidelines on AMP was successfully developed in 2014. This was an initiative by the Malaysian Ministry of Health with the involvement of the Malaysian Medical Council. The process was arduous and it took almost five years of extensive deliberation by experts of various stake holders in the Ministry of Health, universities, professional bodies and private practitioners. The guidelines define classification of aesthetic medical procedures, classification of chapters of medical practitioners, non-specialists (Chapter 1), medical specialists (Chapter 2) and surgical specialists (Chapter 3), scope of AMP for respective chapters, process of registering of medical practitioners leading to issuance of Letter of Credentialing and Privileging (LCP), national registry of registered medical practitioners with LCP, appeal mechanism, application process for foreign medical practitioners, despite some challenges encountered, its implementation has brought some positive impact on the delivery of aesthetic medical practice thus far, there is control on sale of class IV medical lasers to registered medical practitioners with LCP only, self-regulation on scope of practice has minimize complications, there is an established channel for public complaints on unethical practice, availability of national registry of medical practitioners with LCP on Ministry of Health website for public reference, availability of well-structured training courses by qualified local trainers for interested medical practitioners and there is a clear understanding that non-medical practitioners (beauticians) cannot perform procedures identified for medical practitioners. It is hoped that this set of guidelines will meet its objectives in ensuring public safety and upholding professional standard in the delivery of aesthetic medical practice in Malaysia.

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