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**MESSAGE FROM THE PRESIDENT. . .**

**A**s your president over the past year, I have been very excited by the changes and progress of our growing College. The AAD "affiliate issue" was settled, we held our first Midyear Meeting, the basic criteria for preceptorships was revised, we developed new hospital-based residencies, and mock board examinations will be held for the first time this year. We have developed a research award of \$1,000, will recognize the first recipient of the "Albert P. Ulbrich, D.O. Lifetime Achievement Award," and will welcome a record number of resident/trainee speakers to our Annual Meeting in November.

But, just as I was about to enjoy a moment of relaxation from this hectic year, I was invited by AOA president Mitchell Kasovac, D.O. to represent our College at the "Conference on Graduate Medical Education" held in Chicago on September 14-16.

This was the first conference of its kind that brought together selected program directors, deans of osteopathic medical schools, selected directors of medical education, AOA officers and staff, and other educators from throughout the osteopathic medical profession. The theme of the Conference was "Changes and Innovations in Graduate Medical Education." In short, our task was to create a "blueprint" for the future of graduate medical education in the osteopathic profession. Integral parts of this "blueprint" were future trends for ambulatory training, research in osteopathic graduate medical education, the involvement of colleges of osteopathic medicine in graduate medical education, and the development of goals, objectives and evaluations to be used in residency training programs.

The weekend consisted of presentations in the four stated areas mentioned above fol-

lowed by long and arduous brainstorming sessions in which appropriate goals and recommendations would be provided for all the participants.

The final charge to our group was - based on the information gathered at this conference - what does the AOCD intend to do to further develop residency training programs? Some of the general recommendations for the AOCD to consider were a gradual phase out of all preceptorship programs by 1991. Basically meaning that if anyone wishes to sit for AOBD certification exams and be board certified by the AOA after 1991, they must complete a hospital-based residency approved by the AOA.

The next recommendation was the development of new residency training programs with active research components and appropriate university affiliations. Also suggested, was yearly mock board exams which would evaluate the goals and objectives as stated in the AOA Residency Guidelines.

The information presented in the Conference was extremely enlightening. We as a College have already instituted some of the recommended changes and have begun working on others. Hopefully, this Conference will become an annual event open to all program directors and others involved in internship or osteopathic residency training. The scope and nature of my current message does not allow me to review the numerous details that were discussed at the Conference, however, I would be happy to mail a complete synopsis to anyone requesting it.

Of interest are the following statistics that were presented: There are approximately 6,000 allopathic dermatologists in the

*See "President's Message" Cont'd on Page 8*

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College of Dermatology**  
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**SEEKING AN ASSOCIATE?  
... WHY NOT LIST YOUR  
NAME WITH THE AOCD  
CENTRAL OFFICE IN  
ATLANTA AND INCLUDE  
A BRIEF DESCRIPTION OF  
YOUR PRACTICE  
OPPORTUNITY IN THE  
AOCD NEWSLETTER?**

**CORRECTION**

*The May, 1990, issue of the AOCD NEWSLETTER included a wonderful article entitled THE TRIAD. Unfortunately, the author's name was inadvertently omitted. We are pleased to inform you that the author was DANIEL KOPRINCE, D.O. Our apologies to Dr. Koprince and our appreciation for his insightful and thoughtful articles.*

*Letters*

July 2, 1990

Dear Dr. Cleaver:

On behalf of myself, President William Voss, D.O., and the remainder of the AOA Board of Trustees, I want to thank you very much for your attendance and participation in the AOA/Practice Affiliate Leadership Conference on June 30, 1990, in Chicago. A copy of the notes taken at the Conference will be distributed within the coming weeks.

I personally felt that the agenda items were appropriate and pertinent, and would encourage you to share the essence of the discussions with your specialty college board and general membership. I look for this Conference to grow into a semi-annual two-way discussion of important issues affecting the osteopathic profession in the 90's. **TOGETHER WE CAN SOLVE THEM!**

Please be aware that the AOA Board of Trustees is "listening" to its constituencies. We are also looking for solutions to the problems as they are identified. We all know that "CHANGE IS DIFFICULT", but an open dialogue helps us each deal with the other's opinions and ideas. This is a great profession that has come a long way in 98 years through many hardships. By our working together harmoniously within the profession, we can forge ahead rapidly in the 90's.

Thanks again for your participation in this year's Conference. I look forward to a prosperous and successful year of working with you and your college toward a unified and progressive osteopathic profession.

Best personal regards,  
Mitchell Kasovac, D.O.  
President-Elect, AOA

May 15, 1990

Dear Jim:

I first want to respond to you, and through you to the membership, regarding the honor of Life Membership in the College. It is truly gratifying to be so recognized and it is equally gratifying to have reached this astonishing age and still be active in practice and able to play golf regularly (even if I must use tan tees in the sand traps).

Further, I was most delighted to be nominated for the "Albert P. Ulbrich, D.O. Award". As most everyone in our group knows, Al and I were good friends and he was one who not only commanded respect but also deserved it. To carry on his name and reputation is a responsibility that the AOCD has chosen wisely.

Once again . . . many thanks and with kindest personal regards, I remain

Fraternally,  
Harry B. Elmets, D.O.

**QUOTE OF INTEREST**

"Scholarship funding preferences should go to medical schools like the Kirksville College of Osteopathic Medicine with a long track record of producing rural family physicians. We don't need more expensive urban-oriented programs . . ." C. Everett Koop, MD, former Surgeon General, at the 1990 Annual Meeting of the National Rural Health Association.

## **BOARD CERTIFICATION EXAMS**

Thomas Bonino, D.O.

All residents and preceptees who have completed their programs and are scheduled to sit for board certifications exams: these exams will be held on Sunday, November 25, 1990, from 9:00 a.m. to 5:00 p.m. at the Hilton Hotel in Las Vegas, Nevada. For those candidates who are completing programs this year and would like to sit for exams next year, all paperwork must be submitted to the American Osteopathic Board of Dermatology by April, 1991.

Congratulations to the following, who passed their board exams in 1989: Drs. Angelo Mancuso, Richard A. Miller, Lawrence Paolini, Daniel Seff, Edward H. Yob.

## **EDUCATION EVALUATING COMMITTEE**

James D. Bernard, D.O.

The Education Evaluating Committee will meet in September to review new training programs. The Committee's recommendations will be presented to the AOA Committee on Postdoctoral Training (COPT) in early November.

The AOA COPT will forward their recommendations to the AOA Bureau of Professional Education, which will either approve, deny or defer a program.

Residents are reminded to submit their annual reports and scientific papers to the AOA Department of Education in a timely fashion to avoid delays that would place them on the next agenda six months later. (Send copies and keep the originals in a safe place.)

## **TANNING PARLOR LEGISLATION ADOPTED**

The American Academy of Dermatology reports that tanning parlor legislation designed to protect the public passed in ten states during the first five months of 1990, and that bills are being drafted or are currently pending in fourteen more. Most legislation requires that the salon owner supervise the use of tanning equipment, provide patrons with protective eyewear, post warning signs and require the signing of a consent form. Salon owners are also being required to register with the state health department annually and are subject to fines for breaching the new requirements.

## **KOPRINCE AWARDS TO BE GIVEN AT ANNUAL MEETING**



*Daniel Koprince, D.O., shown above on right, with AOCD 1990 Convention Resource Development Chair Dr. Shelly Friedman.*

Once again papers presented at the AOCD Annual Meeting will be judged, using established and approved criteria, for the two "Daniel Koprince, D.O., Educational Awards". The first award will be for three residents/trainees in their first, second and third year of training, and the second will be for two osteopathic dermatologists in practice.

Recipients of last year's awards were Robert J. Signore, D.O. (first year of training); James W. Young, D.O. (second year of training); and Layne D. Nisenbaum, D.O. (third year of training). D.O.'s in practice were Dr. James Q. Del Rosso and Dr. Hartley A. Schwartzberg.

## **AOCD INSTITUTES RECYCLING PROGRAM**

The AOCD had begun a recycling program designed to reduce the amount of useable paper thrown away each day. A "recycling box" has been placed by the copy machine and each desk. Paper printed on one side is reused for reports, memos and other documents that are for internal use. After paper is "recycled" in the office, it is placed in a box and transported to a recycling facility (usually once a month).

This is a simple program that can be started in any office, large or small. It just takes a little change of habit and a bit of effort.

AMERICAN OSTEOPATHIC  
COLLEGE OF DERMATOLOGY  
1990

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(**\$1,000+**)

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PLEASE POST THIS LIST IN YOUR OFFICE AND EXPRESS THE APPRECIATION OF THE AOCD TO THOSE COMPANIES THAT CALL ON YOU.

*Shelly Friedman, D.O., Chair  
Resource Development*

*Research Award Available  
To D.O. Dermatologists*

A research award in the amount of \$1,000 will be provided to the D.O. member who submits the winning research paper in 1991. The award, was named after one of the College founders, Dr. Albert Ulbrich. A panel of judges selected by the AOCD president will review papers using a modified version of the NOF Research Grant criteria.

Papers, suitable for publishing, should be submitted to the AOCD Central office in Atlanta.

**AOHA BOARD RECOMMENDS  
JOINING AHA**

In an unprecedented move, the Board of Trustees of the American Osteopathic Hospital Association has accepted a proposal from the American Hospital Association to create a Special Constituency Section for osteopathic hospitals. The Board action must be approved by the AOHA membership at its annual meeting in October. If approved, the AOHA would cease operation.

In response to strong membership comment, the AOA has issued a proposal, approved by the AOA Board of Trustees, to create an "Osteopathic Hospital Service Corporation" designed to deliver marketing/public relations and legislative advocacy services to subscribing osteopathic hospitals. The new corporation would not replace the AOHA, but serve only to "provide a separate osteopathic agency to address the critical needs of our hospitals", said Mr. John Perrin, Executive Director of the AOA in a statement issued September 7.

**HARRY B. ELMETS, D.O., TO BE  
HONORED AT AOCD MEETING**



*Harry B. Elmets, D.O.*

One of the founding members of the AOCD will be honored at the Annual Meeting of the College for his many contributions and tireless efforts on behalf of osteopathic medicine and osteopathic dermatology in particular. Recently granted Life Membership in AOCD, Dr. Harry B. Elmets was selected as the first recipient of the "Albert P. Ulbrich, D.O., Lifetime Achievement Award".

**PICTURES NEEDED FOR  
MEMBERSHIP DIRECTORY**

The 1990-91 AOCD Membership Directory will be published in December. There are still a number of members who have not sent in their pictures for the directory. Don't be a "blank"; send a head-and-shoulders photo today!

\*\*\*\*\* KOPRINCE KORNER \*\*\*\*\*

CLINICAL PEARLS IN SURGICAL & MEDICAL DERMATOLOGY

☞ Treatment of Aphthous Stomatitis

Recurrent aphthous stomatitis may be effectively treated by using topical application of the contents of **Tessalon Perles**. Tessalon Perles are capsules containing benzonatate USP and are prescribed for oral use to symptomatically relieve coughing. Benzonatate acts peripherally as an anesthetic. For aphthous ulcers, simply **pierce a perle with a pin and apply the contents to each ulcer**. Another effective therapy is topical application of a mixture of **Benadryl Elixir and Xylocaine**.

*Robert Norman, D.O.  
Boston, MA*



☞ Tretinoin 0.05% Cream - Aquaphor Mixture for Ichthyosis

Have the pharmacist compound 45 grams of **Retin-A 0.05% Cream** in 90 grams of **Aquaphor**. This is applied **twice daily** for patients with either **ichthyosis vulgaris** or **lamellar ichthyosis**. This treatment has proven to be very successful and patient compliance has not been a problem.

*Howard Goldman, D.O.  
Philadelphia, PA*



☞ "Always Think Scabies"

In any patient with **severe pruritus**, always **think first of scabies**. (*Editor's Note: Some patients with scabies have minimal cutaneous findings despite severe pruritus. Examine the patient thoroughly as burrows may be located anyplace on the skin, not only on the hands. In males, always examine the penis as scabetic penile papules or nodules may be the only clue. Also, scrape debris under fingernails for microscopic examination as patients sometimes "scratch away" diagnostic material present in cutaneous burrows.*)

*James Bernard, D.O.  
Atlanta, Georgia*



☞ Every Other Day Astemizole (Hismanal) Therapy

Some patients with chronic idiopathic urticaria who are well controlled on astemizole (Hismanal) 10 mg. daily may still benefit using a dosage of **10 mg. every other day** due to the **prolonged half-life of the active metabolites**. When this works, the cost of therapy decreases significantly.

*James Q. Del Rosso, D.O.  
Columbus, Ohio*



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