

Editorial

Dermatology in Pakistan: past, present and future

Prof. Tahir Saeed Haroon

President Pakistan Association of Dermatologists

The theme of the 19th World Congress held at Sydney, Australia, in 1997, was *'Look back, look around and look forward.'* On the eve of Silver Jubilee of Pakistan Association of Dermatologists (PAD), let us look at the past, present and future of dermatology in Pakistan in the context of this theme.

The dawn of modern dermatology can be traced back to around 200 years in Europe. The centre of dermatological research shifted to United States by the middle of the last century, around the time Pakistan gained freedom from the colonial rule in 1947. Ironically, there was not a single qualified dermatologist in both the eastern and the western wings of the nascent country. Dermatology as a distinct entity was virtually non-existent at the time.

The challenge was well taken up by the medical hierarchy of that era, with the Pak military taking the lead. A trainee was sent to St. John's Institute of Dermatology, London in 1948. Later, he was able to set up a department at the military hospital, Rawalpindi, in 1962.

In the civil, two class fellows from the King Edward Medical College, Lahore, returned with MRCP (Edinburgh), with dermatology as the special subject, in 1955 and 1957, respectively. One took charge of Skin and Social Hygiene Centre, Karachi, Sindh

(established in 1952) and the other succeeded in setting up the first teaching department of dermatology, in the country, at the King Edward Medical/Mayo Hospital, Lahore, Punjab, in 1960. In the North West Frontier Province, a Canada-trained consultant dermatologist was appointed at the Lady Reading Hospital, Peshawar, in 1966. In Baluchistan, the department of dermatology was set up at the Bolan Medical College, Quetta, in 1978, by a Pakistani-trained dermatologist. In East Pakistan (now Bangladesh), a trainee from St. John's Institute of Dermatology pioneered this specialty in the late 50's. He also established the first dermatological society in the country, the forerunner of the current Bangladesh Dermatological Society.

In 1970's the government opened many new medical colleges to overcome the shortage of health personnel. Over the ensuing years dermatology departments were established and manned in all these institutions. Clinical dermatology was firmly rooted by then. Nonetheless, academic spurt came in late 70's when departments of dermatology at the Jinnah Postgraduate Medical Centre, Karachi, Mayo hospital, Lahore and the military hospital, Rawalpindi started to train a sizeable number of members and fellows of the College of Physician and Surgeons Pakistan and MD candidates. These trainees now man important posts round the country.

From 1976 to 2000 can be considered as the golden era of dermatology when exponential growth occurred in every aspect.

Another landmark was achieved in January, 1979, when Pakistan Association of Dermatologists (PAD) was founded at Karachi. Over the quarter of a century it has provided a platform for the local dermatologists to get together and exchange clinical, academic and research information. As a member of the International League of Dermatological Societies and the South Asian Regional Association of Dermatologists, it is also represented at the international forums.

Since 1991, PAD publishes its own quarterly periodical, the Journal of the Pakistan Association of Dermatologists. It is recognized by the Pakistan Medical and Dental Council and is indexed in various medical database resources. JPAD has recently gone on line, a step forward in the right direction.

Pakistan Medical and Dental Council recognizes dermatology as an essential specialty and currently the curriculum is being worked out at the undergraduate level.

At present, around 420 dermatologists are providing skin care in all provinces of the country (1:350000 population), an improvement from 1947 when no specialized care was available.

More than half of the dermatologists possess a qualification (MCPS and FCPS) of the College of Physicians and Surgeon Pakistan. Some have been accredited by the national universities (MD) while the rest have been

training abroad. About 90% of the medical colleges in public sector are staffed by properly qualified teachers, 80% have inpatient wards, and some of them provide specialized facilities e.g. laser, phototherapy, dermatosurgery. At present there are seven chairs in dermatology and the number is likely to increase in future. Many institutions are actively involved in research work and are imparting training at the undergraduate and the postgraduate levels. The indigenous research work is published and cross-referenced in many peer-reviewed journals.

Spectrum of dermatological diseases in Pakistan is mainly tropical including infestations, pyodermas, superficial mycoses, mycobacterial infections and sexually transmitted infections (barring AIDS). Due to the Afghan war and influx of refugees new foci of leishmaniasis have been identified. Local research in areas of mycology and leishmaniasis has been acknowledged the world over. The prevalence of other dermatoses e.g. eczemas, psoriasis, pigmentary disorders is similar to elsewhere. Malignant melanoma is a rare entity. The phenomenon of globalization and industrialization is likely to alter the present spectrum of skin disease. Leprosy, due to integrated efforts of the government of Pakistan, WHO and other NGOs, has been brought under control.

Dermatology in Pakistan is firmly rooted but faces many challenges. To meet the contemporary needs, undergraduate and postgraduate teaching needs to be customized. Dermatoepidemiology, genetic and molecular dermatology, photobiology, pediatric dermatology, geriatric

dermatology, evidence-based dermatology etc. are other areas to be explored. Cosmetic dermatology and dermatosurgery are relatively newer rewarding subspecialties which need to be given due importance in the postgraduate training. The use of information technology, computerized retrieval of information should be stressed. Training facilities in higher seats of learning abroad should be provided. There is a dire need to establish an independent Institute of Dermatology with state of the art facilities for advanced clinical care and research activities in the aforementioned fields.

Considering the rich legacy, vigour, enthusiasm and ethical standards set by their forebears, the youngsters seem set to steer the ship of dermatology in the rough seas of tomorrow. Let us wish them the best of luck.