It may be difficult to believe, but it has been six years since I became chair of the department. The Medical School reviews clinical departments every six years, so we are in the midst of this review. This process allows us to assess our accomplishments and to look to the future. I'll give you the Cliffs Notes version here.

As we reviewed the department, several key factors to our success emerged. First, we have trusted faculty and staff who execute our three missions of teaching, clinical care and research with profound dedication and compassion. Second, we are well-integrated with the School of Medicine and the Health System. This creates great opportunities for advancing dermatology. Third, we are financially stable. This supports an environment of collaboration, innovation and scholarship. Fourth, we have hired extremely talented new faculty who broaden and diversify our impact. We actually have added 36 new faculty members since 2010, making us one of the largest dermatology departments in the country.

We have worked hard to increase the clinical impact of our department by diversifying our geographic reach. Our clinical outreach strategy included adding five new practice locations in Bucks County, Washington Square, Valley Forge, Woodbury Heights and Cherry Hill. We also expanded our practices at Radrnor and the Presbyterian Medical Center. As a result of this expansion and other strategies to increase access, total patient visits increased over 165%, now exceeding 122 thousand annually. During this expansion, patient satisfaction reached an all-time high, with Press Ganey “Likelihood to Recommend” and “Moving Through Your Visit” scores in the 99th percentile compared to local area hospitals, including other academic medical centers. Our expansion mirrored that of the health system as new hospitals and clinical sites joined Penn Medicine.

On the educational front, we continue to cultivate the next generation of leaders in dermatology and are consistently recognized as one of the top residency programs in the nation, with over 550 applicants for 5 open slots this year. We were able to obtain funding from the VA for an additional residency slot, but we continue to look for additional ways to fund resident education. We have also grown our fellowship programs to provide excellent post-residency clinical and research training and research and training in basic science research, clinical epidemiology, CTCL, dermatopathology, procedural dermatology, complex medical dermatology and autoimmune disease. We encourage our trainees to pursue collaborative opportunities within the Medical School and University. This enhances our ability to conduct innovative translational research and is vital to our success.

Despite a challenging environment for obtaining research funding, our grant funding has increased by approximately 25% since 2010. We are committed to increasing sponsored research, including clinical, basic and translational research. Our recent success of NIH of over $4 million to support our Skin Biology and Diseases Resource-based Center over the next five years is a great way to look ahead. We need to learn more about this exciting research grant on page 9 of this issue. In addition, we continue to explore alternative funding sources such as corporate and privately-funded grants to decrease our reliance on government-sponsored research funding, with clinical trials research an important focus. Research funding from commercial, private and other non-profit sources now accounts for 35% of total research funding within the Department, compared to 16% in 2011. Changes over the last decade in the regulatory, scientific, economic and ethical constructs of human research provide unique opportunities and challenges for clinical investigation at the departmental, institutional and national levels. To compete in this complex environment, we revamped our Clinical Studies Unit three years ago and in-turn have seen clinical trials research grow, with 16 fully funded phase II trials ongoing and another 2 in the pipeline.

As we look ahead to the next six years and beyond, we want to ensure that we remain strong and build upon our success. Our goals include increasing collaboration within our department, across the institution and throughout the community. We have organized regular meetings around these efforts and our faculty leadership continues to strategize ways to multiply collaboration through integrative research and coordinated patient care.

To further enable focusing on our goals of research, education and clinical care, we added five key senior leadership Vice Chair positions over the last six years. William James, MD became the Vice Chair of Education; Camela Vitoria, MD the Vice Chair of Clinical Operations; Sarah Millar, PhD the Vice Chair of Basic Science Research; Joel Gelfand, MD, MSc the Vice Chair of Clinical Research and David Margolis, MD, PhD the Vice Chair of Faculty Affairs. This team will help us concentrate on our goals and navigate the changing landscape in healthcare, research funding and education as unknowns appear on the horizon.

We need to maximize the support we have from our community partners, including alumni and friends of the department, to strengthen our outreach mission and increase philanthropic support, to gain referrals for complex medical and surgical cases, and to increase the number of biopsies sent to our Dermatology lab, which is vital to sustaining all of our missions.

I want to thank all of you who are engaged with and support the department. My heartfelt appreciation goes out to all of our dedicated faculty and staff for their outstanding talents and commitment. We appreciate all of your contributions and wish you a joyous holiday season and a prosperous and healthy New Year!

Sincerely,

George Cotsarelis, MD
cotsarel@mail.med.upenn.edu
215.898.3240

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Professor and Chairman
Department of Dermatology
Chair of the department.
Vice Chair of Faculty Affairs.
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A CAUSE WERTH FIGHTING FOR

Dr. Victoria Werth has dedicated her career to studying and advancing treatments for complex skin autoimmune disorders that have a significant effect on quality of life

Victoria Werth, MD, Chief of Dermatology at the Philadelphia Veterans Affairs Medical Center and Professor of Dermatology and Medicine at the University of Pennsylvania, is internationally renowned for providing exceptional care to patients suffering from complex autoimmune disorders and blistering diseases, namely lupus, dermatomyositis and pemphigus. For over 25 years, Dr. Werth has served as a champion for patients with these diseases, conducting basic, translational and clinical research to gain new insights into pathogenesis, devise new therapeutics, and increase access to effective medications. As the soror of Dermatology and Medicine at the University of Pennsylvania, is internationally renowned for providing exceptional care to patients suffering from complex autoimmune disorders and blistering diseases, namely lupus, dermatomyositis and pemphigus. For over 25 years, Dr. Werth has served as a champion for patients with these diseases, conducting basic, translational and clinical research to gain new insights into pathogenesis, devise new therapeutics, and increase access to effective medications. As the Director of the Autoimmune Skin Disease Study Unit at Penn Dermatology, she collaborates with other researchers and trains future leaders to expertly manage challenging and rare skin conditions. Through the years, Dr. Werth has changed the landscape of complex medical dermatology. She has aided in developing the gold standard of care among these patients, many of whom require multidisciplinary treatment, all while helping them cope with the uncertainties of chronic diseases.

Lupus Erythematosus

Lupus erythematosus is an inflammatory autoimmune disease that often manifests cutaneously (CLE). In 2005, Dr. Werth developed the Cutaneous Lupus Erythematosus Disease Area and Severity Index (CLASI), a clinical tool that measures disease activity, damage, and change in severity over time. This tool offered the first rigorous method for clinicians to quantify the degree of improvement in their patients, as well as the ability to classify them into severity groups. With the development of CLASI, clinicians are better equipped to label patients as responders or nonresponders, as researchers found that a 20% or more decrease in CLASI activity score correlated with a patient’s successful response to treatment.

The CLASI has also been used to quantify disease severity in a NIH-funded, multicenter CLE database. Dr. Werth initiated the database in 2006 and has enrolled over 400 patients to date. This database has proven vital to conducting successful validation studies of the CLASI and to determining the impact of cutaneous lupus on patient quality of life (QoL). In addition, the database helps to track symptom flares and reveals subtle delineations between different disease subtypes.

While current treatment options for lupus are still sparse, having validated disease severity tool has led to increased interest in evaluating the skin in systemic lupus erythematosus (SLE) trials and as an initial proof of concept for new drug targets. Dr. Werth and her team just presented the results of a phase 2 trial examining a cannabidiol derivative that grew out of an open label trial funded by the Alliance for Lupus Research.

Dermatomyositis

Dermatomyositis (DM) is an autoimmune disease characterized by muscle weakness and skin rash, but can also affect the lungs and heart. Of the patients with DM that Dr. Werth sees, about 50% have the skin-predominant form, compared to a prevalence of 20% in the overall DM population. Although patients with the skin-predominant form are in the minority, Dr. Werth stresses the importance of including them in studies and clinical trials, as the disease is highly burdensome to patients’ quality of life. In order to progress on this path toward clinical trials, a tool to measure disease severity proved necessary, prompting Dr. Werth to create the Cutaneous Dermatomyositis Disease Area and Severity Index (CDASI), which helps to measure how skin involvement and has displayed excellent inter-rater and intra-rater reliability among users.

As dermatomyositis, especially the skin-predominant form, is understudied and poorly understood, skin disease signs and symptoms are diverse and ever evolving. Currently there are no FDA approved treatments for dermatomyositis; however, recent work has shown that interferons may be an important target. As Dr. Werth is always on the forefront of research in her field, she and her team are currently examining the safety and tolerability of interferons in combination with tumor necrosis factor alpha inhibitors as the first randomized controlled trial in patients with skin-predominant dermatomyositis.

Pemphigus

Pemphigus is a rare, chronic blistering disease in which autoantibodies attack desmogleins, causing a loss of adhesion in the skin and mucous membranes.

In 2005, international experts on blistering diseases realized the need for consistent, validated definitions and measures, which would improve the ability to perform randomized clinical trials. Dr. Werth agreed to spearhead this effort and started the process of developing a measurable clinical tool parallel to the CLASI for lupus. This new scale for pemphigus, called the Pemphigus Disease Area Index (PDAI), has since been used in studies to validate its reliability, responsiveness and biomarkers. With a validated tool in place to measure disease severity, Dr. Werth shifted his focus toward clinical trials. Interestingly, next generation biologic therapies are prompting a deviation from the usual immunosuppression route of treatment that often results in severe side effects for patients. Recently, biologics are not only incorporated into the treatment regimen, but also prescribed as the first line of treatment. Rituximab, an anti-CD20 medication, which is FDA-approved for non-Hodgkin’s Lymphoma and CLL, results in a more targeted depletion of B cells instead of broad immunosuppression. While small studies have shown the value of various biologics for treating pemphigus and other autoimmune diseases, a need exists for a greater number of large, controlled trials to determine long-term efficacy. Dr. Werth is currently trying to open this gap.

She is the lead investigator of an ongoing study named PEMPHX, which is a large multi-center, interventional study that examines the potential use in pemphigus vulgaris (PV) patients to determine its safety and efficacy.

Implications for Quality of Life

Frequently, skin disease symptoms have a significant negative impact on the physical, emotional and social well-being of patients. They are known to cause a host of secondary issues for patients, including depression, anxiety and extreme photosensitivity, all of which can severely limit a patient’s social activities. As autoimmune skin diseases progress in their responsiveness to therapeutics, researchers are interested in understanding how fluctuations in disease activity affect QoL. Currently available QoL tools are limited by their skin specificity, so the development of improved QoL scales that address systemic symptoms will provide a more comprehensive assessment. Dr. Werth appreciates that QoL measurements are a crucial piece in the development of new therapies, as future drugs will not only resolve the primary disease but also address any additional factors that inhibit patients.

To refer a patient or to learn more about the program and participation in a clinical trial, contact us at 215.615.2940. Pharmacists and other clinical and research professionals may contact Dr. Victoria Werth directly at werth@mail.med.upenn.edu.

For more information about supporting this research efforts, please contact Caitlin Crowe Doelp at 215.746.2167 or cccrowe@upenn.edu.

References:


Left to right: Emily Hejazi, Clinical Research Coordinator, Julie Burnoughs, Clinical Research Coordinator; Joyce Okawa, Clinical Research Coordinator; and Dr. Victoria Werth, Professor of Dermatology and Medicine.
The 6th annual Albert M. Kligman Lectureship was help on September 14, 2016 at the University of Pennsyl-
avia. Dr. Kligman was a member of the Depart-
ment of Dermatology for more than 50 years and a
leader in the field. Born March 17, 1916 in Philadelphi,
Dr. Kligman graduated from Pennsylvania State Col-
lege in 1939 and came to the University of Pennsyl-
avia for his graduate work. He received a PhD in
mycology in 1942, and then began studying medicine
at Penn. After his internship at the Albert Einstein
Medical Center in Philadelphia, he became a resident
in dermatology at Penn. He joined the faculty of the
Department of Dermatology at Penn and quickly rose
to the rank of Professor in 1957.

Dr. Kligman was an outstanding teacher, extremely
productive researcher, talented clinician and an in-
spirational figure in dermatology. He trained over 60
international fellows, many of whom went on to chair
departments and have successful research careers.
Dr. Kligman’s contributions to dermatology are re-
markably vast and cover nearly every aspect of clin-
ical dermatology. Although perhaps best known for
his breakthroughs in the understanding of acne and
aging skin, he made major contributions to cutane-
ous myology, human hair follicle biology, skin barrier
formation, contact dermatitis, atopic dermatitis, nail
biology, eczema and apocrine gland dysfunction, cor-
ticolosteroid effects on the skin, photodermatitis, pig-
mentary disorders, xerosis, seborrheic dermatitis and
cutaneous imaging. The breadth of this list is simply
remarkable. Dr. Kligman and his wife Dr. Lorraine Kl-
giman have been very generous to the department
to physicians at all stages of their career. This
annual lecture honors his legacy and, this year,
featured speaker John J. Voorhees, MD, Chairman
and Duncan and Ella Poth Distinguished Professor of
Dermatology at the University of Michigan Medical
School, presented the lecture entitled “Skin Aging:
Clinical and Basic Mechanisms.” Dr. Voorhees received
his MD and completed his internship, residency, and
postdoctoral training all at the University of Michi-
gan. He has served as the Chairman of Dermatolo-
ogy at Michigan since 1975, focusing his research and
clinical career on studying psoriasis and the aging of
the skin. He elucidated the mechanisms behind the
weakening of the skin’s collagen support by both nat-
ural processes as well as UV light, subsequently lead-
ing to the development of preventative agents with
greater efficacy.

In recognition of his substantial scientific contribu-
tions, Dr. Voorhees has received numerous accolades
including the Lifetime Achievement Award from the
National Psoriasis Foundation, the Stephen Roth-
man Memorial Award of the Society for Investigative
Dermatology and the Master Dermatologist Award of
the American Academy of Dermatology among many
others. He has served as president of many top pro-
fessional societies including Society for Investigative
Dermatology, Dermatology Foundation, Association
of Professors of Dermatology, the Michigan Dermato-
logical Society and the American Dermatological As-
sociation. We were delighted to have Dr. Voorhees on
campus to share his research with us.

On September 1, 2016, Penn Dermatology faculty, fellows and stu-
dents gave presentations on their current research, fostering an ed-
ucational environment to learn about each other’s work and to pro-
mote collaboration. This year we had outstanding participation, with
15 researchers presenting their work, allowing attendees to learn
about innovation taking place here at Penn Dermatology:

- Alain Rook, MD, Professor, Dermatology: “Overcoming immune Checkpoints: Rele-
  vance to Cutaneous T-cell Lymphoma”
- Ellen Kim, MD, Associate Professor, Dermatology: “Targeted Monoclonal Antibody
  Therapies for CTLA: The Dream vs Reality”
- Jules Lipoff, MD, Assistant Professor, Dermatology: “Implementing Teledermatol-
  ogy to Improve Access to Care”
- Rob Micheletti, MD, Assistant Professor, Dermatology: “Implementing Teledermatol-
  ogy to Improve Access to Care”
- Joy Wan, MD, Postdoctoral fellow, Margolis lab: “Early and Late Onset Pediatric
  Atopic Dermatitis: Variations in the ‘Atopic March’”
- Junko Takeshita, MD, PhD, MSCE, Assistant Professor, Dermatology: “Racial
  Ethnic Disparities in Healthcare Utilization for Chronic Inflammatory Skin Diseases”
- Cory Simpson, MD, PhD, Postdoctoral fellow, Holzbaur lab: “Using Advanced Mi-
  croscopy to Study Autophagy-Mediated Organelle Degradation in a Live Epidermal
  Model”
- Brian Capell, MD, PhD, Postdoctoral fellow, Birger lab: “Epigenetics and the Skin”
- Christoph Ellerbrecht, MD, Postdoctoral fellow, Payne lab: “Novel Chimeric Immu-
  noreceptors for Pemphigus Vulgaris PV Therapy”
- Adam San Miguel, PhD thesis student, Grice lab: “Coming Clean: The Truth about
  Antimicrobial Drugs and the Skin Microbiome”
- Chris Natala, PhD thesis student, Rinklab: “Sex Hormones Regulation of Mela-
  nomagenesis”
- Thuzar Shin, MD, PhD, Assistant Professor, Dermatology: “Study of REGN2810 in
  Patients with Advanced Cutaneous Squamous Cell Carcinoma”
- Heather Rossengard, MD student, Cotarelis lab: “Effects of Postaglandin D2 on
  Hair Follicle Stem Cells and Progenitor Cells”
- Xuming Zhu, PhD, Postdoctoral fellow, Milar lab: “NDAC1 Regulate the Epithelial
  Response to StH Pathway Activation”
- Sixia Huang, PhD, Postdoctoral fellow, Rompalas lab: “The Role of Cutaneous In-
  nervation in Stem Cell Activity and Wound Healing”

6TH ANNUAL ALBERT M. KLINMAN LECTURESHIP SYMPOSIUM

BASIC SCIENCE RESEARCH MORNING

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dents gave presentations on their current research, fostering an ed-
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  nervation in Stem Cell Activity and Wound Healing”
We are delighted to announce the establishment of a new Penn Skin Biology and Diseases Resource-based Center (SBDRC), which has been funded by the National Institute of Arthritis and Musculoskeletal and Skin Diseases / NIH with a $4M grant over 5 years. The Center Director is Sarah E. Milar, PhD, Vice-Chair for Basic Research in the Department of Dermatology; the Co-Director is George Cotsarelis, MD, Chair of Dermatology. The goal of the Center is to promote research in skin biology and skin diseases and to expedite translation of basic findings to clinical practice by facilitating interactions between investigators, supporting innovative and interdisciplinary projects, and bringing new investigators into the field. SBDRC members will have access to specialized subsidized research core facilities, Pilot and Feasibility Study grants, and educational and mentoring opportunities as described below.

Core A: Skin Histology and Characterization, led by John Seykora, MD, PhD, provides innovative, state-of-the-art services to characterize the histopathologic and molecular features of skin samples from human patients and genetically engineered mice. This core facilitates mouse modeling of human disease.

Core B: Skin Procurement and Engineering, led by Aimee Payne, MD, PhD, provides fresh skin and primary skin cells from normal and diseased humans and mice as well as expertise and reagents for functional analyses of normal and genetically modified human skin in vitro and in vivo.

Core C: Study Design and Data Analysis, led by David Margolis, MD, PhD, provides epidemiological and analytical expertise to guarantee the successful design and analysis of research studies focusing on cutaneous biology. This core seeks to increase the impact and relevance of pre-clinical studies to human disease.

Pilot & Feasibility Studies: Full Pilot and Feasibility grants of $20,000-$50,000 for junior faculty lacking ROI or POI funding, faculty from other disciplines proposing new skin-related projects, and faculty proposing innovative and collaborative interdisciplinary and/or translational bench-bedside projects. Mini-grants of $15,000 to support transition to independence for physician-scientists in training and senior post-doctoral fellows.

Speaker Series & Annual Research Retreat: The SBDRC will sponsor outstanding speakers in areas relevant to cutaneous biology and disease and an annual research retreat. Stay tuned for more details!

Internal Grant Review & Mentoring: The SBDRC will organize internal reviews for members’ NIH grant submissions in areas relevant to cutaneous biology and disease; mentoring committees for junior faculty members and trainee Associate Members; and a Diversity Committee to advise on strategies to support women and diversity faculty and trainees.

Community Outreach: The SBDRC will host a Saturday Academy on four consecutive Saturdays in March-April to introduce local high school students to the exciting, and promise of cutaneous research. Stipends will also be available for two high school students per year to conduct summer research projects in Dermatology laboratories.
NEW THERAPY TREATS AUTOIMMUNE DISEASE

The Payne Lab has shown that engineered T cells can selectively target the antibody-producing cells that cause autoimmune disease

Aimee S. Payne, MD, PhD, the Albert M. Kligman Associate Professor of Dermatology and Michael C. Milone, MD, PhD, an Assistant Professor of Pathology and Laboratory Medicine, have found a way to remove the subset of antibody-making cells that cause an autoimmune disease, without harming the rest of the immune system. The team studied an autoimmune disease called pemphigus vulgaris (PV), a condition in which a patient’s own immune cells attack a protein called desmoglein-3 (Dsg3) that normally adheres skin cells. Current therapies for autoimmune diseases, such as Prednisone and Rituximab, suppress large parts of the immune system, leaving patients vulnerable to potentially fatal opportunistic infections and cancers.

The Payne researchers demonstrated their new technique by successfully treating an otherwise fatal autoimmune disease in a mouse model, without apparent off-target effects, which could harm healthy tissue. The results were published in the July 8 issue of Science. “This is a powerful strategy for targeting just autoimmune cells and sparing the good immune cells that protect us from infection,” said Dr. Payne.

Drs. Payne and Milone adapted the technique from the promising anti-cancer strategy by which T cells are engineered to destroy malignant cells in certain leukemias and lymphomas. “Our study effectively opens up the application of this anti-cancer technology to the treatment of a much wider range of diseases, including autoimmunity and transplant rejection,” Milone said.

The key element in the new strategy is based on an artificial target-recognizing receptor, called a chimeric antigen receptor, or CAR, which can be engineered into patients’ T cells. In human trials, researchers remove some of patients’ T cells through a process similar to dialysis and then engineer them in a laboratory to add the gene for the CAR so that the new receptor is expressed in the T cells. The new cells are then multiplied in the lab before re-infusing them into the patient. The T cells use their CAR receptors to bind to molecules on target cells, and the act of binding triggers an internal signal that strongly activates the T cells, so they swiftly destroy their targets.

The basic CAR T cell concept was first described in the late 1980s, principally as an anti-cancer strategy, but technical challenges delayed its translation into successful therapies. However, since 2011, experimental CAR T cell treatments for B cell leukemias and lymphomas, cancers in which patients’ healthy B cells turn cancerous, have been successful in some patients for whom standard therapies had failed. B cells, which produce antibodies to fight invading pathogens, can also cause autoimmunity. Dr. Payne researches autoimmunity, and a few years ago, a postdoctoral researcher in her laboratory, Christoph T. Elebrecht, MD, took an interest in CAR T cell technology as a potential weapon against B cell-related autoimmune diseases. Soon Payne’s lab teamed up with Milone’s, which studies CAR T cell technology, in the hope of finding a powerful new way to treat these ailments.

“We thought we could adapt this technology that’s really good at killing all B cells in the body to target specifically the B cells that make antibodies that cause autoimmune disease,” said Milone. “Targeting just the cells that cause autoimmunity has been the ultimate goal for therapy in this field,” noted Payne.

A more disease-specific receptor

In the new study, for which Elebrecht was first author, the team took aim at pemphigus vulgaris (PV). This condition occurs when a patient’s antibodies attack molecules that normally keep skin cells together. When left untreated, PV leads to extensive skin blistering and is almost always fatal, but in recent decades the condition has been treatable with broadly immunosuppressive drugs such as Prednisone, Mycophenolate Mofetil and Rituximab.

To treat PV without causing broad immunosuppression, the Penn team designed an artificial CAR-type receptor that would direct patients’ T cells to attack only the B cells producing harmful anti-Dsg3 antibodies. The team developed a “chimeric autoantibody receptor,” or CAAR, that displays fragments of the autoantigen Dsg3, the same fragments to which PV-causing antibodies and their B cells typically bind, as Payne’s laboratory and others have shown in prior studies. The artificial receptor acts as a lure for the B cells that target Dsg3, bringing them into fatal contact with the therapeutic T cells.

Testing many variants, the team eventually found an artificial receptor design that worked well in cell culture, enabling host T cells to efficiently destroy cells producing antibodies to desmoglobin, including those derived from PV patients. The engineered T cells also performed successfully in a mouse model of PV, killing desmoglobin-specific B cells and preventing blistering and other manifestations of autoimmunity in the animals. “We were able to show that the treatment killed all the Dsg3-specific B cells, a proof of concept that this approach works,” stated Dr. Payne.

T cell therapies can be complicated by many factors. But in these experiments, the Penn scientists’ engineered cells maintained their potency despite the presence of anti-Dsg3 antibodies that might have swarmed their artificial receptors. In addition, there were no signs that the engineered T cells caused side effects by hitting the wrong cellular targets in the mice.

The team now plans to test their treatment in dogs, which can also develop PV and often die from the disease. “If we can use this technology to cure PV safely in dogs, it would be a breakthrough for veterinary medicine, and would hopefully pave the way for trials of this therapy in human pemphigus patients,” Payne said. Also on the horizon are applications of CAAR T cell technology for other types of autoimmunity. “If you can identify a specific marker of a B cell that you want to target, then in principle this strategy can work,” Payne said.

Other co-authors of the study include Dr. Vijay G. Bhog, Arben Nace, Eun Jung Choi, MS, Dr. Xuming Mao, Dr. Michael Jeffrey Cho, Dr. John T. Seykora, and Dr. George Cotsarelis, all of Penn; Dr. Giovanni Di Zenzo of the Istituto Dermopatico dell’Immacolata in Rome; and Dr. Antonio Lanzevocchi of the Institute for Research in Biomedicine in Bellinzona, Switzerland.

For more information about supporting these research efforts, please contact Caitlin Crowe Doelp at 215.746.2167 or ccrowe@upenn.edu.
JEN-CHIH HSIIEH MEMORIAL RESEARCH FUND SCHOLARSHIPS

It has been a year since we lost our friend and colleague, Dr. Jen-Chih Hsieh. Jen-Chih was an extraordinarily talented scientist and delightful human-being who deeply enjoyed teaching science to the students in our lab. With help from many of you, we established the Jen-Chih Hsieh Memorial Research Fund at Penn Dermatology to honor his legacy and to support students who want to experience laboratory research in dermatology.

We thank our supporters for their generous donations and are happy to announce that three scholars were awarded to students to promote their laboratory research experience. The 2016 Jen-Chih Hsieh Memorial Scholarship Award Recipients are Heather Rosengard, Shahaan Razak, and Mary Blumenfeld.

Heather Rosengard graduated from Princeton University in 2011 with a BA in History of Science and a MPH from Tel Aviv University’s Sackler School of Medicine in 2012. She is currently enrolled in the Johns Hopkins University School of Medicine and completed three years of study prior to joining the Cotsarelis laboratory in 2015. She studies the effect of prostaglandins on hair follicle stem cells. She will return to Hopkins next year and will receive her MD in 2018.

Shahaan Razak graduated from the University of Miami in 2012 with a BS in Kinesiology and Human & Social Development. He earned a Master’s degree in Education at Johns Hopkins University in 2014, and completed the Bryn Mawr post-baccalaureate program in 2016 before applying to medical school for fall 2017. Mary graduated from Bryn Mawr College in 2012 with a BA in Psychology. She studies the effect of different compounds on hair growth.

Heather, Shahaan, and Mary each received a stipend of $2,500 for their research projects in the Cotsarelis Lab.

To learn more or to make a contribution, please visit the Jen-Chih Hsieh Memorial Page.

PARTNERING WITH PENNDERM

Penn has consistently moved the dermatology field forward through personalized care and therapeutic advances. The Department of Dermatology works continuously to develop new techniques and therapies through research and to educate the next generation of outstanding physicians and researchers.

To maximize our expertise and potential, improvements to our research infrastructure are required. Basic, translational and clinical research activities are the hallmark of our clinical care and patient outcomes. With significant philanthropic investments, this department will move forward addressing pressing medical challenges in dermatologic care and will be instrumental in improving diagnoses, new surgical techniques and quality of life. Lastly, offering the best multidisciplinary care for our patients remains a top priority.

Department of Dermatology Fundraising Priorities

Pilot Research Projects—Honoring Leaders

As the oldest dermatology department in the country, Penn Dermatology has been shaped by many great leaders whose legacies live on through their scientific breakthroughs. Established in 1874 by Dr. Louis Duhring, Penn Dermatology follows the traditions of many great 19th and 20th century physician researchers who worked collaboratively and across disciplines, such as with the engineering school. As a contributor to pilot research projects in cutaneous regeneration, Penn investigators gain the ability to impact patients worldwide with novel approaches to skin diseases, innovative treatments and the potential for cures.

Fellowship Training Programs—Supporting New Investigators

Penn Dermatology’s training programs attract the most outstanding candidates, developing leaders in dermatologic research, academic and clinical dermatology. Funds directed toward fellowship training programs guarantee Penn Dermatology’s long tradition of educating exceptional scientists and clinicians.

Endowed Professorships—Rewarding Innovation

Supporting the work of Penn’s physician scientists is of utmost priority. Endowed professorships in investigative dermatology provide Penn Dermatology with the ability to retain and attract exceptional faculty. For decades, Penn’s preeminent dermatologists and researchers consistently receive recognition for excellence in patient care, research discoveries and education. Endowed professorships are instrumental in permanently recognizing the dedication of the department’s faculty and their important work.

Laboratories and Research Facilities—Promoting Scientific Advancement

Research space is of great necessity. New laboratories and instruments provide the path to great discoveries. With the right resources, Penn Dermatology will develop a cutaneous regeneration and tissue engineering effort focused on developing new treatments for skin disorders.

Private philanthropy meets funding needs not covered by government grants or insurance reimbursements. Your donation enables us to break new ground and to improve upon existing therapies.

Philanthropic gifts of all sizes to support our research, educational and clinical endeavors are greatly appreciated. Naming opportunities within the department begin at the $25,000-level. Additionally, any gift can be given outright, through a planned giving vehicle, or can be structured to be paid over a 5-year period.

For more information about partnering with Penn Dermatology, please contact Caitlin Crowe at Penn Medicine Development & Alumni Relations at 215.746.2167 or ccrowe@upenn.edu.
LEVERAGING TECHNOLOGY TO STUDY RARE DISEASE

Dr. Misha Rosenbach is the first at Penn Medicine to utilize Apple’s ResearchKit and develop a new app to study sarcoidosis.

Penn Dermatology continues to seek innovative ways to advance our understanding and treatment of diseases through the latest technology. Misha Rosenbach, MD, Assistant Professor of Dermatology and Internal Medicine at Penn Medicine and founder of Penn’s Sarcoidosis Clinic, recently partnered with Dan O’Connor, a Penn medical student, to develop an iPhone app for patients with sarcoidosis. The app, which is currently in its testing phase and due to launch in early 2017, provides patients with vetted, up-to-date information about their disease, links patients to local support groups and expert caregivers and has an optional research component which aims to help physicians track detailed information about the impact of this complex disease on patients.

Sarcoidosis is an inflammatory disease characterized by the presence of granulomas. It requires interdisciplinary care as it affects the lungs (90% of patients), skin (25-30%), eyes (25%), and less commonly, the heart and brain. The cause is largely unknown but seems to stem from a combination of environmental factors and genetic predisposition. For patients diagnosed with this disease, the long-term clinical trajectory spans a wide spectrum, from barely detectable to chronic deterioration and rarely, death. Because sarcoidosis patients experience such a high degree of variability and severity of symptoms, understanding the true impact of sarcoidosis has been a challenge. Through this novel approach using mobile app-based data collection, physicians will have access to an exponentially larger amount of patient information than ever before, aiding them in drawing logical inferences between data points and eventually communicating them into actionable information.

Development and Design of the Sarcoidosis App

Dr. Rosenbach and Dan O’Connor used Apple’s ResearchKit as the platform for the app, which allowed them to customize the design based on their desired outcomes. This framework allows physicians to obtain important patient information, coupled with the ability to continuously track a significantly larger and varied population compared to traditional studies. The app is extremely user friendly and requires minimal effort from patients. It interfaces with Apple’s HealthKit to record metrics such as heart rate, step count and caloric output, which are valuable pieces of information in a disease where exercise has proven to mitigate symptoms for some.

To promote functional ease for patients, the app consists of just four tabs at the bottom:

- A Dashboard to log symptoms over time, providing insights into how activity level might fluctuate during flare-ups.
- A Learn tab provides a scientifically-vetted knowledge base to help patients learn more about sarcoidosis. It also uses GPS to connect them with local experts and support groups, an invaluable resource for patients with a rare disease.
- A Profile tab contains general information about the patient and a link to leave the study at any time.
- An Activities tab contains surveys that indicate how the disease influences patient quality of life. The app responds to each patient’s unique disease trajectory, using an algorithm to push the most relevant surveys to each user. For example, if the app detects a flare-up, it will increase the frequency of the surveys and alter the questions based on symptoms.

Future Implications

Dr. Rosenbach, who in 2015 received Penn Medicine’s highest clinical honor with induction into the Academy of Master Clinicians, currently follows about 150 patients with sarcoidosis with varying degrees of severity. Certified in both Internal Medicine and Dermatology, he is well equipped to manage the most complex medical dermatologic problems and serves as an advocate for patients with rare diseases. He believes the implications for this technology are huge, especially for orphan diseases where typical studies involve so few patients. Other health-based apps have proven incredibly powerful; in the case of mPower, an app that tracks patients with Parkinson’s Disease, the volume of patient data received was unprecedented, with 7,436 patients enrolled in the study in the first six hours after the app launched. By comparison, the largest Parkinson’s Disease study prior to this had 1,700 enrolled patients. This amplification of data points will hopefully help form the basis for potential new approaches to treatment and improvement of patient quality of life. Dr. Rosenbach hopes to mimic mPower’s high level of patient enrollment and retention with his app by also engaging with patients remotely and eliminating barriers to traditional studies. He is currently working to develop standards of care for patients with sarcoidosis and information gleaned from the app will aid greatly in this pursuit. App-based research offers huge promise for physicians and researchers to connect with large numbers of patients with rare diseases and to gather information from a large population longitudinally over time.

THE POWER OF PHILANTHROPY

“It’s important to help those who help so many! Misha Rosenbach is the face of Penn Medicine Compassion and Innovation...”

- Joan Siegel

Penn Dermatology is grateful for all of the philanthropic partners who help advance our missions in research, education and patient care. Support from philanthropist Joan Siegel has helped to accelerate important research initiatives focusing on rare dermatologic diseases, including sarcoidosis.
WELCOME NEW FACULTY

Bruce Brod, MD
Dr. Bruce Brod received his MD from the University of Pennsylvania Perelman School of Medicine in 1987 and completed his residency in dermatology in 1991. He joined Penn Dermatology as a Clinical Assistant Professor in 1999 and was appointed Clinical Professor in 2013. His clinical career has focused on the treatment of contact dermatitis, and he has served as the co-director of the Occupational and Contact Dermatitis Clinic at the Hospital of the University of Pennsylvania since 1998. Dr. Brod sees patients at the Perelman Center for Advanced Medicine and Penn Medicine Valley Forge.

Joined November 2016

STAFF SPOTLIGHT

Colleen Dwyer-Shin
Transitional permanently into new role as the Clinical Nurse Manager for the Medical Dermatology Clinic at the Perelman Center

Kimberly Regan
Promoted to Clinical Nurse Manager for the Penn Dermatology Oncology Center

Kristen Reid
Transitional permanently into new role as the Practice Manager for the Medical Dermatology Clinic at the Perelman Center

Marc Swan
Promoted to Program Coordinator for the Penn Dermatology Oncology Center

UPENN ALUMNI

WE WOULD LOVE TO HEAR FROM YOU!

The Department of Dermatology is committed to staying connected with our talented alumni. Please share with us updates of your recent activities and accomplishments, or simply send us your most current contact information so that we can stay connected.

Whether it has been 5 or 50 years since your time with the University of Pennsylvania, we look forward to hearing about all of the exciting things you have been up to. Please e-mail us at the following address:

PennDermAlumni@uphs.upenn.edu

HIGHLIGHT OF DISCOVERIES

New Research Tries to Crack the Code of Diabetic Foot Ulcers
Elizabeth Grice, PhD, Assistant Professor of Dermatology, and her team study the microbiome of the skin and have recently focused on examining its variability in diabetic foot ulcers. These chronic wounds are associated with exorbitant costs as well as a significant mortality rate, as 45 to 55 percent of diabetic foot ulcer patients will die within five years. In a study led by post-doctoral researcher Lindsay Kalan, PhD, 100 patients with diabetic foot ulcers were followed for 26 weeks, or until the wound healed or required amputation. Participants all received the same medical care, which included having their deep wound fluid sampled every two weeks. When Dr. Grice’s team analyzed the samples, they found 80 percent of them contained fungi, a stunning number much higher than previous estimates. This study provides a more precise read-out of how microbial communities fluctuate and how they are linked to outcomes. They found that fungi were able to get a stronger foothold in wounds with a high level of dead tissue, which could lead to more complications. They also showed that fungal pathogens closely interact and form structures with bacterial pathogens co-isolated from the wounds. The next steps for Dr. Grice and her team are to more precisely determine how the microbes are impairing healing and to analyze the impact they could be having on patient outcomes.

To learn more about this research, please visit the Penn Medicine News website.

Survey of Dermatology Residency Programs Shows Increase in Skills-Based Training, Assessment
Joseph Sobanko, MD, Assistant Professor of Dermatology, and his colleagues examined the current landscape of surgical training in dermatology residency, specifically looking at the extent to which deliberate practice methods are used. As programs begin to transition away from apprentice-based learning into more simulation-based training, it is important to examine the variability among them and establish a benchmark to improve upon. Dr. Sobanko and his team conducted a survey of program directors at 117 Accreditation Council for Graduate Medical Education-approved dermatology residencies and received responses from 42 program directors. They found that over half of programs (57%) dedicate 10 to 30 hours each year to surgical didactics. Sixty-nine percent of programs use simulation models, while 62% of programs use formal assessment-guided feedback in evaluating surgical skills. Deliberate practice methods allow trainees to continually practice and refine their surgical techniques without the immediate needs of patients, which are often the driving factors for training. As cutaneous surgery becomes more complex, adapting the structure of training programs to adequately prepare residents will help continue to ensure excellence in patient care.

To learn more about this study, please visit the Dermatologic Surgery Journal website.
Penn Dermatology Moves to University City
This fall, the Department of Dermatology finalized its move to Penn Medicine University City’s (PMUC) brand new facilities located at 3737 Market Street, 11th Floor, Philadelphia, PA 19104. This move offers increased space and resources that will help streamline services, improve access to patient and enhance the overall patient experience.

General dermatology and Genetic disease dermatology* services are offered by the following providers:
- Douglas Pugliese, MD, MPH: Chief, PPMC Dermatology
- Jules Lipoff, MD
- Temitayo Oguniyeye, MD
- Cory Simpson, MD, PhD*
- Marie Uberti-Benz, MD
- Joy Wan, MD
- Rachel Woods, CRNP, MSN

Patients can schedule an appointment at PMUC by calling 800.789.PENN (7366).

Penn Dermatology Comes to Cherry Hill, NJ
As the Department seeks to expand its practices, Penn Dermatology is pleased to announce that its new location in Cherry Hill opened in July 2016. The Penn Dermatology Cherry Hill office is located at Penn Medicine Cherry Hill, 1865 Route 70 East, 2nd Floor, Cherry Hill, NJ 08003.

General dermatology services are provided by Joe Kist, MD at this location. Patients can schedule an appointment by calling 800.789.PENN (7366).

Penn Dermatology Now in Washington Square
Earlier this year, Penn Dermatology opened a practice at Penn Medicine Washington Square. The Penn Dermatology Washington Square office is located at Penn Medicine Washington Square, 800 Walnut St, 16th floor, Philadelphia, PA 19107.

Cosmetic and general dermatology services are provided by Susan Taylor, MD at this location. Patients can schedule an appointment by calling 800.789.PENN (7366).
FACULTY AWARDS & HONORS

Our talented faculty members receive numerous awards and recognition for their outstanding contributions and achievements.

Bruce Brod, MD
Received the Dermatology Foundation 2015 Practitioner of the Year Award

Elizabeth Grice, PhD
Received the 2016 Michael Brown New Investigator Award

Ellen Kim, MD
Named Chair of the Medical Advisory Council for the Cutaneous Lymphoma Foundation in May 2016

Carrie Kovarik, MD
Received the Clarence S. Livingood, MD, Memorial Award and Lectureship

Sarah Millar, PhD
Received the 2016 FOCUS Award for the Advancement of Women in Medicine
Received the 2017 William Montagna Lectureship Award from the SID

Aimee Payne, MD, PhD
Elected to the American Society for Clinical Investigation
Named the 2016 International Pemphigus and Pemphigoid Foundation Physician of the Year

Ellen Kim, MD
Named Chair of the Medical Advisory Council for the Cutaneous Lymphoma Foundation in May 2016

Elizabeth Grice, PhD
Received the 2016 Michael Brown New Investigator Award

Bruce Brod, MD
Received the Dermatology Foundation 2015 Practitioner of the Year Award

3RD ANNUAL CPUP SERVICE EXCELLENCE AWARDS

CPUP staff and faculty were recognized during Penn Medicine Experience week, celebrating Penn’s collective commitment to service excellence.

Clinical Practices of the University of Pennsylvania Employee of the Year

Congratulations to Kim Regan, Dermatologic Surgery Nurse Manager, and Marc Swan, Dermatologic Surgery Fellowship Coordinator, who received the CPUP Employee of the Year Awards! They were two of the three recipients for all employees in CPUP.

Employee of the Year is awarded to CPUP Employees who have demonstrated significant contributions to the Clinical Practices of the University of Pennsylvania, including productivity enhancements, improvements to patient care, customer service excellence, financial stewardship and exceeding established departmental goals.

TOP (from left to right): Dr. Jillian Lautenbach, Service Domain Team Member; Deborah Rose, Service Domain Administrative Co-Chair; Kimberly Regan, CPUP Employee of the Year; & Dr. Andrew Litwack, Service Domain Physician Co-Chair.

BOTTOM (from left to right): Dr. Jillian Lautenbach, Service Domain Team Member; Deborah Rose, Service Domain Administrative Co-Chair; Marc Swan, CPUP Employee of the Year; & Dr. Andrew Litwack, Service Domain Physician Co-Chair.

Best Overall Award for Service Excellence

Congratulations to the Dermatologic Surgery division at Penn Dermatology Bucks County for being awarded Best Overall for Service Excellence.

Pictured (from left to right): Stacy Serviss, Kara Ward, RN & Krista Kalnas, HT

Not Pictured: Amber Crumpton, CSA; Monica Davis, HT; Jeremy Eubom, MD; Hilary Kinton, CSA; Megan Kuzniatczik RN; Jennifer Rutting, RN.
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