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PROGRAM



THE EUROPEAN SOCIETY  
FOR PHOTODYNAMIC  
THERAPY

PDT Training Course

12<sup>th</sup> March 2009

Leiden University Medical Center, Leiden  
The Netherlands

Leiden  
2009

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# EURO-PDT 2009

## Training Course Organization

### Hosted by

Dr S. Pavel  
(Leiden University Medical Center)

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L.R. Braathen, R.-M. Szeimies,  
A. Sidoroff, C.A. Morton

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### Congress secretariat and hotel reservation

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Dr S. Pavel  
Leiden University Medical Center

Dear colleagues,

It is my pleasure to welcome you to the PDT training course that will be held in the Leiden University Medical Center (LUMC).

The LUMC is one of the eight university hospitals in the Netherlands.

It is not the largest, but it is internationally well known especially because of its very good scientific reputation.

The LUMC belongs to the Leiden University, the oldest university in the Netherlands, where the old tradition unites with the modern style of university life.

Department of Dermatology has been involved in research regarding the photodynamic therapy from 1998.

We have participated in several clinical trials that finally supported the registration of the methyl ester of 5-aminolevulinic acid for the clinical use.

Nowadays, the photodynamic therapy has become a part of our routine dermatologic practice and it is a regular element of the training program of our dermatologic residents.

We hope that the hours spent in our hospital during the PDT training course will be pleasant and useful for you.

Dr. S. Pavel, *dermatologist*

THURSDAY, 12 MARCH 2009

8:30	Registration	13:10-14:00	Lunch
9:00-9:10	Welcome <b>Lasse R. Braathen, Bern, Switzerland</b>	14:00-15:00	Practical training in smaller groups: Illumination of the patients
9:10-9:30	Short introduction to Photodynamic Therapy (PDT) <b>Stan Pavel, Leiden, The Netherlands</b>	15:00-15:20	PDT in organ transplant patients <b>Rolf-Markus Szeimies, Regensburg, Germany</b>
9:30-9:45	Patient and lesion selection for PDT <b>Colin A. Morton, Stirling, United Kingdom</b>	15:20-15:40	Pain management <b>Lasse R. Braathen, Bern, Switzerland</b>
9:45-10:00	Patient information and informed consent <b>Rolf-Markus Szeimies, Regensburg, Germany</b>	15:40-16:00	Q&A and discussion
10:00-11:00	Practical training in smaller groups: Presentation of patient's histories, Lesion preparation, drug application & pain management	16:00-16:30	Coffee break
11:00-11:30	Coffee break	16:30-17:00	Q&A and discussion
11:30-11:50	Epidemiology of Non-Melanoma Skin Cancer (NMSC) <b>Alexis Sidoroff, Innsbruck, Austria</b>	17:00	Receipt of certificates, training course closure
11:50-12:10	Basics of fluorescence diagnosis and PDT <b>Rolf-Markus Szeimies, Regensburg, Germany</b>	20:00	Welcome dinner - Hotels Van Oranje, Noordwijk (invitation required)
12:10-12:30	Evidence based use of PDT for Actinic Keratosis (AK) <b>Lasse R. Braathen, Bern, Switzerland</b>		
12:30-12:50	Evidence based use of PDT for Bowen's Disease (BD) <b>Colin A. Morton, Stirling, United Kingdom</b>		
12:50-13:10	Evidence based use of PDT for Basal Cell Carcinoma (BCC) <b>Colin A. Morton, Stirling, United Kingdom</b>		



## QUIZZ

- 1 What is the name of the substance we apply on the skin for PDT?  
.....
- 2 For how long should the substance be applied?  
.....
- 3 What is the name of the substance that is photosensitizing the skin?  
.....
- 4 What is the colour of the light we use for MAL-PDT?  
.....
- 5 What is the name of the fast reacting agent that do the damage to the cancer cells during PDT?  
.....
- 6 PDT is indicated in dermato-oncology for :
- skin melanoma .....Yes  .....No
  - nodular basal cell carcinoma.....Yes  .....No
  - all subtype of basal cell carcinoma .....Yes  .....No
  - squamous cell carcinoma.....Yes  .....No
  - actinic keratosis.....Yes  .....No
- 7 What other medical indications for PDT do you know?  
.....
- 8 What is the major side effect? When does it occur?  
.....
- 9 How long lasts a PDT illumination?  
.....
- 10 Can PDT be repeated on the same lesion?  
.....

## MATERIAL NEEDED

- 1 The topical photosensitizer :  
Methyl ester aminolevulinic acid-Metvix (Europe),  
Metvixia (France and USA),  
Levulan (aminolevulinic acid in the USA)  
.....
- 2 An adequate light source  
.....
- 3 Disposable and small material :
- a. Sterile gloves
  - b. Curettes
  - c. Occlusive dressing, protected from light
  - d. Saline serum and/or antiseptic solution (for skin cleansing)
  - e. Protection glasses (for the patient and for the medical staff)
  - f. Fan (to improve the confort of the patient during illumination)

## BRIEF DESCRIPTION OF PDT PROCEDURE

### 1-Lesion preparation

To remove any crust and squams using a sterile curette (or any other approved procedure)

### 2-Cream application:

This is performed with a wood spatula. 1mm thickness of cream is recommended on the lesion and must include 5 to 10 mm margins of healthy skin. An occlusive dressing protected from light is required. Cream application time must last around 3 hours.

### 3-Illumination of the lesion

- The lamp state of function should be checked before use.
- Patients must be comfortably positioned.
- The cream is removed using saline serum.
- The illumination should be performed on the entire pre-treated (cream application) area.
- Lamp positioning requires expertise of the practitioner to adapt to body surface in order to maintain a proper light intensity during the procedure on the entire area to be treated.
- Light illumination time may vary according to the PDT lamp used.

### 4-After illumination

A simple dressing can be applied to protect irritation from clothes.

### 5-Lesion care after the PDT session:

Simple cleaning with antiseptic or saline solution. In case of crust: vaselin can be used to help its removal. The lesion healing should take about 9 to 10 days. The skin can remain slightly erythematous for several weeks and this time varies according to patient's skin type, but no infiltration nor extension of the lesion should be seen.

## AVAILABLE SOLUTIONS TO DECREASE THE PAIN

1 **Basic analgic** (such as acetaminophen) (1 hour before illumination, according to patient's tolerance, i.e.no allergy)

2 **Fan**

3 **Pulverisation of water**

4 **Local analgesic** (always before the illumination)

5 **Skin vibrator**

6 **Cooling pack**

## PDT APPROVED REGIMENS

### For actinic keratosis (AK)

One PDT session. Evaluation at 3 months . One new PDT session in case of incomplete response.

### For superficial basal cell carcinoma (sBCC)

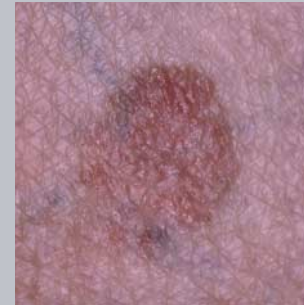
One PDT session. Evaluation at 3 months. Two new PDT sessions 8 days apart in case of incomplete response.

### For Bowen's disease (BD)

Two PDT sessions 8 days apart. Evaluation at 3 months. Two new PDT sessions 8 days apart in case of incomplete response.

NB: no non-inflammatory drugs should be taken during the treatment as they may decrease the PDT efficacy.

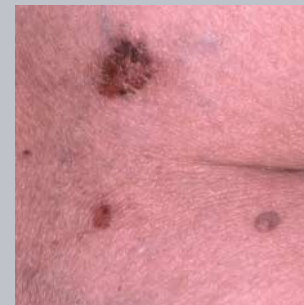
## EXAMPLES OF IMMEDIATE AND DELAYED REACTIONS AFTER PDT TREATMENT



Lesion before treatment



Lesion just after illumination (slight oedema)



Lesion 1 week after illumination (crusting)



Lesion after 3 months of follow up (slight erythema)

