

Application for Recognition as an IADVL Fellowship Centre

1. **Initial Application/Renewal:** Initial application
2. **Speciality :** Trichology
3. **Program Director:** Dr Rachita Dhurat
4. **Other faculty** (*please specify whether full time or part time*):
Dr Smita Ghate, Associate Professor,
Dr Ameet Dandale, Assistant Professor
Dr Meghana Phiske, Assistant Professor
(All the faculty are full time staff in the department)
5. **Department:** Department of Dermatology, STD, Leprosy

Institution: Lokmanya Tilak Municipal Medical College and General Hospital

Address: Sion Hospital, Sion, Mumbai- 400022

6. **University affiliation for Dermatology/Venereology/Leprology and for Fellowship speciality** (*if applicable*): Maharashtra University Of Health Sciences (MUHS)
7. **Does the Institute have specific restrictions on Fellowship candidates?**
Yes/No. *If Yes, please give details:* No
8. **Does the Fellowship entail any financial implication for the candidate other than that stipulated by the IADVL?** Yes/No. *If Yes, please give details:* No
9. **Approximate daily OPD attendance of patients in the department:** 200
10. **Details of the speciality and faculty in the department:**
 - a. *Program Director's qualifications/expertise in that field:*
Dr Rachita Dhurat

Qualification: MD (Dermatology). Presently Professor and Head of Dermatology, LTMMC & GH, Sion Hospital, Mumbai. Her interest in the field of Trichology is very well known. She is the pioneer in microneedling technology for hair stimulation. She has worked in development of methodology of PRP without use of commercial kits. She has been invited as a speaker in various international conferences like European Hair Research Society, World Congress Hair Research and World Congress of Dermatology.

b. Qualifications of other faculty in that field:

Dr Smita Ghate MD (Dermatology)

Associate Professor, Incharge dermatopathology

Dr Meghana Phiske MD(Dermatology)

Assistant Professor

Dr Ameet Dandale DNB (Dermatology)

Assistant Professor

c. For departments with other faculty, will the candidate be allowed access to the OT/equipment on the days of other faculty? Yes

The Department has a well equipped Dermatosurgery unit and a separate Minor OT for the procedures. The candidates shall be allowed access to equipments in this unit.

- d. *Faculty who will be in charge of the program if the Program Director goes on long leave or quits the department:* Dr Smita Ghate, Associate Professor
- e. *Number of years for which the department/institution has been carrying out similar work:* 15 years
- f. *Daily workload (out- and in-patient) in that specialty:*
Trichology OPD has about 30 patients per day. Dermatoscopy, Scalp biopsy, Trichogram, horizontal scalp biopsy on a daily basis.
- g. *Equipment (for lasers, please specify the type of machines and their utility):* Trichogram and Dermatoscope, stereotactic device, Trichoscan
- h. *Facilities (e.g. library):* Library available
- i. *Space:* The Department has OPD Rooms and Minor OT.
- j. *Opportunities for basic or clinical research:* Clinical trials and research work shall be undertaken under the guidance of the faculty with ethical clearance from the local ethical committee of the college.
- k. *Details of weekly academic activities undertaken by department:*

DAY	ACADEMICS
MONDAY	Journal club
TUESDAY	Histopathology slides reporting & discussion
WEDNESDAY	Seminar
THURSDAY	Case presentation

FRIDAY	Special procedure
SATURDAY	Ward case discussion

1.

m. *Details of presentations/publications/research in the specialty from the department/institution in the last 2 years:*

1. M M Phiske, G Avhad, H R Jerajani . Keratoacanthoma centrifugum marginatum at an unusual site, Indian Journal of Dermatology, issue 58, 2013, pg 74-76
2. H R Jerajani, C. Janaki, Sharat Kumar, M M Phiske. Comparative assessment of the efficacy and safety of sertaconazole (2%) cream versus terbinafine cream (1%) versus luliconazole (1%) cream in patients with dermatophytoses: A pilot study, Indian Journal of Dermatology, issue 58, 2013, pg 34-38
3. Viswanath V, M M Phiske, Gopalani VV . Systemic sclerosis: Current concepts in pathogenesis and therapeutic aspects of dermatological manifestations, Indian J Dermatol 2013;58: 255-68
4. Tainwala RR, Phiske M M, Raghuwanshi A, Mathapati S, Manjare AK, Jerajani HR . Perplexing purpura in two females: Rare case of autoerythrocyte sensitization syndrome, Indian Dermatol Online J 2013;4:305-8

5. Sheena Bansal, M M Phiske, H R Jerajani. Multiple nodules on scalp in a middle-aged female, International Journal of Dermatology, Volume 52, Issue 2, pages 209–211, February 2013
6. A L Dandale, R S Dhurat, S S Ghate. Papulonecrotic tubercled of glans pevis: A common disease at an uncommon site, IJSTD, 34 (2), 132-134
7. A L Dandale, S S Ghate, R S Dhurat. Perianal pseudoverrucous papules & nodules, IJSTD, 34(1), 44-46
8. A L Dandale, Nandini Gupta, R S Dhurat, S S Ghate Unusual presentation of lichen scrofulosorum, IJDVL, 79(3), 436-438
9. A L Dandale . A randomized evaluator blinded study of effect of microneedling in androgen alopecia,: A pilot study, International Journal of Trichology, 5(1), 6-11
10. R. S. Dhurat Pai NP, Potter M, Behlim T, Landry G, Vадnais C, Rodrigues C, Joseph L, Shetty A .Will a quadruple multiplexd point of care screening strategy for HIV related co-infections be feasible and impact detection of new co-infections in at rist populations? Results from cross-sectional studies, BMJ Open. 2014 Dec 15;4(12):e005040
11. Dr. R. S. Dhurat Langley RG, Elewski BE, Lebwohl M, Reich K, Griffiths CE, Papp K, Puig L, Nakagawa H, Spelman L, Sigurgeirsson B, Rivas E, Tsai TF, Wasel N, Tyring S, Salko T, Hampele I, Notter M, Karpov A, Helou S, Papavassilis C. Secukinumab in plaque psoriasis--results of two phase 3 trials, ERASURE Study Group; FIXTURE Study Group. N Engl J Med. 2014 Jul 24;371(4):326-38
12. Dr. R. S. Dhurat Bhamla SA, Saraogi PP. Is trichoscopy a reliable tool to diagnose early female pattern hair loss? Int J Trichology. 2013 Jul;5(3):121-5
13. Dr. R. S. Dhurat Topal AA .Scleroderma therapy: clinical overview of current trends and future perspective. Rheumatol Int. 2013 Jan; 33(1):1-18.
14. Dr. R. S. Dhurat, Tendolkar U, Shinde A, Baveja S, Phiske M. Trichosporon inkin and Trichosporon mucoides as unusual causes of white piedra of scalp hair. Indian J Dermatol Venereol Leprol. 2014 Jul-Aug;80(4):324-7
15. Dr. R. S. Dhurat , Avhad G, Ghate S . Milia en plaque., Indian Dermatol Online J. 2014 Oct;5(4):550-1.
16. Dr. R. S. Dhurat , Dandale A, Mantri MD, Thakkar V, Ghate S . Bowen's disease: An unusual clinical presentation., Indian Dermatol

Online J. 2014 Oct;5(4):526-8.	
17. Dr. R. S. Dhurat, Mantri MD, Dandale A, Ghate S. Pedunculated poroma on forearm: A rare clinical presentation., , Indian Dermatol Online J. 2014 Oct;5(4):469-71.	
18. Dr. R. S. Dhurat Sukesh MS, Dandale A, Sarkate A, Ghate S. Case Report: Solitary mastocytoma treated successfully with topical tacrolimus. F1000Res. 2014 Aug 1;3	
19. Dr. R. S. Dhurat, Saraogi PP, Nayak CS, Pereira R. Inadvertent Provocative Oral Ondansetron use Leading to Toxic Epidermal Necrolysis in an HIV-infected Patient., Indian J Dermatol. 2012 Nov;57(6):503	
20. Dr. R. S. Dhurat, Pereira RR, Nayak CS, Topal A. <u>An unusually painful nodule.</u> , Indian J Dermatol. 2012 May;57(3):249-50	
21. Dr. M. M. Phiske .Cerebriform intradermal nevus: A rare entity and its associations-Letter to editor Indian Dermatology Online Journal 2014	
22. Dr. M. M. Phiske .Facial melanosis –Part 1 The Aestheticians Journal, June 2014	
23. Dr. M. M. Phiske .An approach to acanthosis nigricans. Indian Dermatol Online J 2014	
24. Dr. M. M. Phiske .Facial melanosis –Part 2. The Aestheticians Journal, August 2014	
25. Dr. M. M. Phiske, Ajit Condo, Shyam Verma, Koushik Lahiri. Side effects of topical steroids: A long overdue revisit. Indian Dermatol Online J Oct-Dec 2014 vol 5, issue 4, pg 416-425	
26. Dr. R. S. Dhurat, Shah BJ, Sumathy TK, Torsekar RG, Viswanath V, Mukhi JI, Kadhe G, Ahirrao P. Efficacy and tolerability of topical fixed combination of nadifloxacin 1% and adapalene 0.1% in the treatment of mild to moderate acne vulgaris in Indian patients: a multicenter, open-labelled, prospective study., Indian J Dermatol. 2014 Jul;59(4):385-9.	

11. **Has similar training been offered by the department?** Yes/No.

If Yes, please give details (if renewal, also include number of fellows trained):

No

12. **Are hostel facilities available? Yes/No.** If Yes, please indicate the charges:

Yes

AC rooms – Rs 400 per day

Non AC rooms – free on sharing basis

13. Brief description of the intended training program (daily and weekly routine), including details of the curriculum:

Training program:

Candidates will be allowed to see out patients in Trichology OPD, allowed to do scalp biopsies, interpretation of scalp histopathology, Dermatoscopy, and Microneedling for hair stimulation, training in preparation of platelet rich plasma.

Candidates are expected to present at least 2 seminars and a journal club during the course term.

Details of the curriculum:

1. Anatomy and physiology of hair
2. Approach to patients with hair disorders
3. Congenital and genetic hair disorders
4. Infections of hair and scalp
5. Diagnosis and management of cicatricial and non cicatricial alopecia
6. Diagnosis and management of hirsutism and hypertrichosis
7. Scalp tumours

Procedures

1. Basic lab investigations like KOH mount, Light microscopy
2. Dermatoscopy
3. Scalp Biopsy
4. PRP
5. Microneedling

14. **Will trainees get hands on training? Yes**

Signature of the Head of Department

Signature of the Head of Institution