

UK DCTN AGM & Steering Group Meeting Minutes

BAD Annual Meeting, Glasgow SEC

Wednesday 2 July 2025 12.30-2pm

Attendees: Beth Stuart (Chair), Nick Levell, Tim Burton, Carron Layfield, Evelyn Davies, Maggie McPhee, Hywel Williams, Rajasekar Senniappan, Andrew Pink, Zenas Yiu, Areti Makrygeorgou, Aaran Wernham, Amanda Roberts, Rebecca Lapsley, Jaskiran Azad, Laura Davey, Mel Westmoreland, Gavin Fong, Kim Thomas, Hannah Cookson, Sarah McCusker, Claudia DeGiovanni.

Online: Jane Sterling, Clare Baumhauer, Tim Burton, Abby Macbeth, Grace Boyd, Kathy Radley, Pippa Bowes, Laura Howells, Kirsty Garfield, Christina Ye, Maanasa Polubothu, Gemma Whicker, Esther Burden-Teh.

Apologies: Rachel Abbott

Actions

Action/ Resolution	Owner	Date due
Send feedback to POWER study team	MM	ASAP
Send updated UK DCTN constitution to Charity Commission	CL	Within next two months

Minutes

1. Welcome

Beth Stuart welcomed everyone to the meeting and reminded those present to sign in so the numbers attending can be recorded for this AGM.

2. Minutes of previous meeting and matters arising

The previous meeting minutes were available for comment. All actions had been completed as follows:

- Feedback along with contacts and links sent to Matt Ridd (Eczema Clinics).
- Feedback and comments to John Ingram (THESEUS II – HS)
- Feedback to RAPID team on the 'Keeping Control' and 'Coping with Itch' studies.

No further comments on the previous minutes and they were accepted as a true record.

3. AGM Business and Treasurers report

Nomination of new Executive and Steering Committee members:

Executive Committee - Melanie Westmoreland, new nurse representative. Nominated by Beth Stuart, seconded by Hywel Williams. Accepted.

Steering Committee:

Kirsty Garfield (Health Economist) - Nominated by Beth Stuart, seconded by Kim Thomas

Sarah McCusker (Clinician – paediatric dermatology)- Nominated by Beth Stuart, seconded by Nick Levell.

Kathy Radley (Nurse representative) - Nominated by Beth Stuart, seconded by Evelyn Davies

Alison Lowe (Nurse representative) - Nominated by Beth Stuart, seconded by Claudia DeGiovanni.

All accepted.

Ratifying amendments to the UK DCTN constitution (paper 1)

Amendments to the constitution, as agreed by the UK DCTN Executive Committee, were presented to the group. These added detail about the Executive Chairperson and the Steering group chairperson's term of office with dates, and other nominal changes (including changes to reflect updates in working practices).

Treasurers report (paper 2)

Carron Layfield presented the Treasurers Report which is submitted to the Charity Commission every year. This does not include staffing costs or any funded studies. These funds are principally gained from contributions from funded studies. They pay for training, awards and fellowships, and additional costs such as the promotional products and trustee insurance. Our income remains low but steady with around £20K income each year. We have received a small allocation of funds from our existing ongoing studies. Special thanks to Hywel Williams for donation kindly received.

Total Account balance: £109,810.79

Committed funds for 2025/2026: £53,932.29

Total funds available: £55,878.50

Accounts formally approved.

Honorary Lifetime membership awards:

Beth Stuart presented three honorary UK DCTN lifetime membership awards, as follows (all recipients having stepped down from their Committee roles over the past 3 months):

- Prof. Tracey Sach – Health Economist on Steering Committee
- Prof. Fiona Cowdell – Nurse representative for Steering and Executive Committees
- Dr Carolyn Charman – paediatric dermatology expert on Steering Committee

4. Trial Generation and Prioritisation Panel (TGPP) Update

New panel members needed (x2)– come and talk to us if interested.

UK DCTN Research Clinics - these are new for 2025 and aim to encourage people to come forward with ideas for an informal discussion with the UK DCTN team – Beth Stuart, Carron Layfield, Laura Howells and Rachel Abbott (clinician and TGPP Chairperson). Dates for next sessions are 23 and 24 Sept.

2024 UK DCTN Trainee Groups - 24 trainees working across 4 groups as follows:

1. Paediatric Dermatology (mentors Susannah George and Esther Burden-Teh)
Spironolactone for acne in girls and young women
2. Dermatological Surgery (mentors Aaron Wernham and David Veitch) GLOVE study
3. Medical Dermatology 1 (mentors Richard Barlow and Alia Ahmed) Spironolactone for HS

4. Medical Dermatology 2 (mentors Marianne de Brito and Jonathan Batchelor) Metformin for HS

The trainee groups have been a good source of education for dermatology trainees, and some have proceeded to fully funded trials in the long term. Three of the above groups are continuing to develop their ideas with two having obtained feasibility funding.

UK DCTN Fellowship Awards – Applications by 6 October 2025. We now have one universal application form for all categories – SpR, GP, nurse etc.

5. Update on POWER Study – Oestrogen for Lichen Sclerosus in women

Presented by Dr Rebecca Lapsley and Dr Jaskiran Azad. The team includes researcher Sophie Rees and patient advocate Clare Baumhauer. Feasibility study to inform a future randomised controlled trial assessing the benefit of topical oestrogen in addition to standard topical steroids in the treatment of vulval lichen sclerosus (VLS). This is an important question – shortlisted by the Lichen Sclerosus Priority Setting Partnership and funded by the BSF/BSSVD.

The team propose to conduct surveys and focus groups with both health professionals and patients, recruiting from the UK DCTN and BSSVD memberships, to explore the following objectives:

1. People with VLS:

- a) Personal experience of topical oestrogen
- b) Reported benefits (and side effects) with regards VLS symptoms and flares
- c) Views on primary and secondary outcomes of future RCT
- d) Perceived barriers and facilitators to recruitment and retention
- e) Views on future RCT design

2. Healthcare professionals:

- a) Experience and views on topical oestrogen as an adjunct treatment in VLS
- b) Willingness to recruit for future definitive trial
- c) Views on eligibility criteria for future definitive trial
- d) Views on future RCT design

Start date – August 2025.

Discussion points:

- Ensure the primary outcome is clear and reflects what is important to patients.
- Involve gynaecologists in the focus groups.
- Check other ongoing research on this topic – good to check this every few months
- Decipher the primary RCT question by asking about symptom control, added benefits of oestrogen, steroid use/sparing,
- Ask details about oestrogen use - duration, amount, precise site of application, any instructions given re application, use together with other treatments.
- Patient groups often involve same people (self-selecting) so ensure you increase participation and get wider demographic of women with VLS.
- Might be difficult to find patients willing to talk about sensitive subject – nurses in clinics could help?
- Claudia De Giovanni is conducting a 'menopause and the skin survey' in her region – willing to get involved and contribute to the study.
- Make use of Research Engagement Network
- Aim is to get the question right for the RCT with the potential to change clinical practice.
- Be aware of the timing of other studies and their potential results – PEARLS and SHELLS studies.
- Incorporate 'co-design' involving patients and health professionals together. Both are equally beneficial and can be very good for the co-production of the main trial

- Be aware that you could still struggle to recruit dermatologists to take part in focus groups – Contact PEARLS chief investigator for other health professionals interested in this topic and perhaps try and 'add on' to an investigator meeting for PEARLS
- Brilliant achievement to persevere on this study and receive funding to develop it.

6. Study updates

Carron Layfield provided update of all current developing and ongoing studies.

Current studies (recruiting participants):

Acne Care Online - RCT for testing online intervention is now open and recruiting well 579+/908 13-25 year olds recruited to date. Also secured programme development grant to optimise ACO for diverse skin tones.

TIGER study – food allergy tests for eczema. Recruited 394/ 493 patients (116 GP surgeries involved). Recruitment end date extended to Aug 25 (study end date Oct 26).

COAT cellulitis - recruiting from primary care and urgent care centres - 201/356 patients recruited –introduced a new simplified consent procedure to encourage more participants.

BEACON (adult eczema study) – comparing ciclosporin, methotrexate and dupilumab. Fourth arm of Jak Kinase inhibitor abrocitinib added. Need more recruiting sites. If interested please email BEACON@kcl.ac.uk Also there is an option for eczema patients to self-refer via the website <https://www.beacontrial.org/>

PEARLS – Proactive versus reactive therapy for the prevention of lichen sclerosis. 218/400 participants recruited to date (age 5yrs and above) – 16 sites open and plan to open 3 more. Applying for non-cost 6-month extension to extend recruitment end date to Nov 2025 Email: PEARLS@nottingham.ac.uk .

HEALS2 – Compression and healing of excisional wounds on lower legs by secondary intention. 148 patients recruited to date and 21 sites open (aiming for 32 by end Dec 2025) Still accepting expressions of interest, contact for more information via HEALS2@leeds.ac.uk.

SCC-AFTER - Adjuvant radiotherapy for high-risk SCC. Aims to recruit 840 patients over 4 years from 25 sites across the UK; if effective the use of adjuvant radiotherapy will be incorporated into NHS Treatment pathways. Opened to recruitment – 15 sites open so far.

ACNE-ID Benefits and harms of reduced dose isotretinoin for acne. 10 sites now open and 60/800 patients recruited. More sites still needed – if you have an acne service please consider getting involved. Email acne-id@nottingham.ac.uk

Dexacell – dexamethasone for cellulitis. Recruited 79/450 patients to date and 10 sites open (recruiting from emergency care settings).

Move Smart (psoriasis) – Feasibility study looking at physical activity to improve psoriasis. More male participants needed.

Studies in set-up:

SPOT IT - SCC prevention using topical therapy in immunosuppressed and immunocompetent patients Catherine Harwood (London), Charlotte Proby (Dundee) and Rubeta Matin (Oxford). Funded by CRUK (prevention and population research theme) and in set-up. <https://www.cardiff.ac.uk/centre-for-trials-research/research/studies-and-trials/view/spot-it>

EXCISE Do prophylactic antibiotics reduce the risk of wound infection following excision of ulcerated skin cancers?' (Rachel Abbott) – NIHR HTA funding confirmed and in set up.
<https://www.cardiff.ac.uk/centre-for-trials-research/research/studies-and-trials/view/excise>

Applications submitted for funding:

OPINION Psychological Therapies for Vitiligo Viktoria Eleftheriadou (West Midlands) Outline submitted July 23 (NIHR programme grant and RfPB) – neither successful so now reconsidering options

THESEUS II Adulimimab +/- laser therapy hair removal for HS John Ingram (Cardiff) Full stage NIHR application not successful but the team have resubmitted at stage 1.

METHorMAB Management of Chronic Plaque Psoriasis Philip Hampton (Newcastle) Full stage NIHR application submitted and awaiting final response to reviewer comments.

Eczema Clinics in Primary Care Matt Ridd (Bristol) Outline RfPB stage submitted but rejected. Plans to re-submit a revised application.

7. AOB

Good studies presented today. We welcome more research proposals, please consider submitting vignette to us. Very useful and more likely to succeed if submitted via UK DCTN for development.

Exhibition hall – UK DCTN Stand at PSG23 for duration of conference.

Talks chaired by Beth Stuart and Nick Levell tomorrow morning (3 July) please attend.

Dates of next Steering Committee meeting:

1.30pm Thurs 16 October 2025 Online (Themed Call award applications)