

Old Diseases – New Challenges

In Hong Kong, Dermatology and Venereology have traditionally been bundled together. Thus we have the Hong Kong Society of Dermatology and Venereology. In the Hong Kong College of Physicians, our trainees have to undertake training in both fields before admitted as fellows. There is a common perception that dermatology is more challenging and more interesting than venereology. One reason is perhaps that most sexually transmitted diseases, with the exception of HIV infection, are old and well-established diseases and their clinical features and treatment are well described in textbooks. But is venereology no longer interesting or challenging?

Take the case of syphilis. It is an old disease and was said to have been imported by the crews of Christopher Columbus from the New World. The clinical stages from primary syphilis (PS) to neurosyphilis as well as their treatment have been well described. With effective treatment and control, the incidence of syphilis in Hong Kong had showed a drastic decline from the 70' to early 90'. In 1993, only 16 cases of primary syphilis were reported in the Social Hygiene statistics. There was a time when it was difficult to find a typical chance for teaching purpose. The situation changed dramatically in the late 90', with 293 cases of PS in 1998 and 289 cases in 1999. It is quite amazing to see an almost 20-fold increase within such a short time. With the resurgence of PS, rarer presentations of syphilis have followed. I have encountered a case of secondary syphilis presenting with nephrotic syndrome and another one presenting with obstructive jaundice. Both patients had been investigated extensively but the correct diagnosis was not revealed until the clinicians became suspicious of the diagnosis and ordered the VDRL test.

Condylomata acuminata is another old disease. With the advance in molecular biology, many aspects including the manifestations, the extent of genital HPV infections as well as its oncogenesis mechanism are now better understood. We know that genital wart is only the tip of the iceberg of HPV infections and the spectrum of HPV infections has extended to include cervical dysplasia and cervical cancer in women. Progress has also been made in the therapy for genital HPV infections. Topical imiquimod, which is an immune response modifier, has been proven to be effective in many studies for clearing genital warts with a low relapse rate. Although the role of immune response in clearing genital warts is well recognized, and that interferons have been used for sometime for genital warts, it is only recently did we witness this breakthrough in therapy. There is also evidence which shows that the drug may be useful for treatment of other dermatological conditions like basal cell carcinoma, molluscum contagiosum and common warts. This form of immune modulation therapy has opened a new way for treatment of dermatological diseases.

These are just two examples showing how these old venereal diseases can be interesting and challenging. As specialists in Venereology and Dermatology, we must keep abreast of the changes in epidemiology, changes in clinical presentation as well as recent advance in therapy of these old diseases.

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