

2nd World Congress of Cutaneous Lymphomas and
6th International Symposium on the Biology and Immunology of Cutaneous Lymphoma
February 6-9, 2013, Berlin, Germany

The **2nd World Congress of Cutaneous Lymphomas** (WCCL) and the **6th International Symposium on the Biology and Immunology of Cutaneous Lymphoma** (ISBICL) were jointly held from 6 to 9 February 2013 in Berlin, Germany under the auspice of the International Society of Cutaneous Lymphoma (ISCL), the United States Cutaneous Lymphoma Consortium (USCLC) and the European Organization for Research and Treatment of Cancer Cutaneous Lymphoma Task Force (EORTC-CLTF), and organized by the Department of Dermatology, Venerology and Allergology of the Charité – Universitätsmedizin Berlin. With the conference, the translational research focus of the ISBICL series was combined with the clinical research focus of the WCCL. With more than 350 delegates including clinical and basic researchers from all cutaneous lymphoma centers worldwide, and above 200 scientific contributions it was the largest meeting on the topic so far.

The aim of the conference was to review the current state and the prospects of the research on the molecular and cellular causes of cutaneous lymphomas and related cancers, and the latest in the development of new therapies and diagnosis. A number of reports emphasized the opportunities arising from the new insights provided by genomics and expression studies on cutaneous lymphomas. Specifically, whole exome sequencing and new array platforms have discovered extensive alterations in promoter methylation and microRNA expression as well as multiple mutations in cutaneous lymphoma tumor cells. Discussions pointed at the need to bridge the gap between these new technologies and the morphology-guided clinical and histopathological diagnosis. The newly introduced concept of toponomics attempts this with an integrating multiparameter immunostaining approach to map the molecular topology and co-localization of numerous factors in tissues. This led to discussions on whether and how far new computer and information technologies can help to exploit the information from the new technologies for personalized medicine. Would, for instance, a virtual patient be possible and instrumental to test potential effects of alternative treatments in silico prior to clinical application? In addition to these genome wide approaches several studies investigated the diagnostic value of specific genetic lesions and/ or expression of proteins by tumor cells. New targeted therapies, antibodies specific for cell surface molecules that direct toxins or immune effector mechanisms against the tumor cells or inhibitors of kinases that drive tumor growth, have entered clinical development; some are already at advance stages, and a large number of presentations reported their outcome. Given the potentials of these therapies, the discovery of new targets and the development of new probes to address these targets was of high interest and topic of a number of sessions on new prospects for therapy development. One session was devoted to difficult to treat and rare lymphomas. The state of the art of current therapeutic approach was presented and the development of new therapeutic strategies was discussed, specifically the place for stem cell transplantation for aggressive lymphomas. Given the need for new therapeutic targets in cutaneous lymphomas the molecular cell biology sessions (focusing on cell signaling and apoptosis induction) and immunology sessions were of great interest as these gave insight in the molecular pathology of this disease but also provided novel strategies to treat cutaneous lymphomas.

The contribution of clinicians as well as basic scientists to the different themes of the conference ushered in ample opportunities for discussions across disciplines which was felt to be productive for both sides. The conference series will be continued along these lines to be a forum for clinical and translational research of the cutaneous lymphoma and related communities.

Maarten Vermeer
Department of Dermatology, Leids Universitair Medisch Centrum, Leiden, The Netherlands

Peter Walden
Department of Dermatology, Venerology and Allergology, Charité – Universitätsmedizin Berlin, Germany