Welcome everyone, I would like to thank you for being on the call with us this evening. Our Speaker today is Doctor David Fivenson. On the call today we will discuss treatments and side effects. First let me introduce you to our speaker this evening, Doctor David Fivenson attended The University of Michigan for undergraduate and medical schools. He did his Dermatology Residency at the University of Cincinnati and Immunodermatology Fellowship at the University of California, San Diego. He is board certified in dermatology and immunodermatology. From 1989-2002 he was in full-time academic practice at Henry Ford Hospital in Detroit prior to starting this practice. He is a nationally recognized specialist in autoimmune skin disease, wound care, clinical research and cutaneous T cell lymphoma. He has published over 125 peer-reviewed articles, has lectured extensively at national and international medical conferences and has been repeatedly listed with Who’s Who in America, Best Doctors in America and Castle Connelly's Top Docs. Dr. Fivenson is on the editorial board of the Journal of the American Academy of Dermatology as well as a peer reviewer for several other dermatology journals. He has been an investigator on more than 150 clinical trials for both common and rare skin diseases.

Dr. Fivenson: Thank you all for calling in tonight. This is fun for me and I hope it's interesting and informative for everybody out there in IPPF land. We did come up with a list of questions that people submitted ahead of time and Becky was kind enough to give me a synopsis of them, and it was actually a pretty long list, a lot of different issues. One of the topics that we discussed was maybe a starting point and there were a lot of questions about people who have been suggested to use Doxycycline as one of the therapies for treatment of their disease. And since I can kind of lay claim to having pushed that therapy quite a bit over the years and published quite a bit on I will start there. So the tetracyclines are a family of antibiotics and when they are used in short term they are used to kill various infections in people who may be allergic to other kinds of antibiotics. But they can also be used as long term anti-inflammatory agents meaning that they help suppress inflammation. They can be used in acne for months on end and various other diseases. In particular in our autoimmune blistering diseases they seem to work by suppressing the ability of white blood cells to move in and out of tissues. So it suppresses inflammation by way of not suppressing the immune system so they are inherently safe because they are not considered immunosuppressants.