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Original Article

Pattern of skin diseases among patients attending a tertiary care hospital in Lahore, Pakistan



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الملخص

أهداف البحث: هناك زيادة في حجم الأمراض الجلدية في منطقة جنوب شرق آسيا. تهدف هذه الدراسة إلى تحديد نمط الاضطرابات الجلدية المختلفة التي تظهر في قسم الأمراض الجلدية في مستشفى الرعاية الثالثية، الأمر الذي سوف يساعد على فهم ارتفاع وقوع حالات الإصابة والتدابير الوقائية التي يجب اتخاذها للحد من ذلك.

طرق البحث: أجريت دراسة رصدية على جميع المرضى الذين راجعوا قسم الأمراض الجلدية خلال فترة عام واحد. وتم أخذ التاريخ المرضي وإجراء فحص سريري دقيق لكل مريض. وأجريت الفحوصات والخزعات الجلدية عند الحاجة لتأكد التشخيص.

النتائج: راجع ٩٥٩٨٣ مريضا العيادات الخارجية لقسم الأمراض الجلدية، بمستشفى مايو لجامعة الملك إدوارد الطبية في باكستان. من بينهم ٢٤٣٠ مريضا راجعوا المستشفى بشكل متكرر لمتابعة حالتهم، في حين تم تسجيل مريضا راجعوا المستشفى بشكل الإناث ٥٨٪ من الحالات والذكور ٤٤٪، معظمهم من الفنة العمرية ٢٠٤٠ سنة. تم تشخيص الإكزيما عند ٧١٢٨١ (١٣٠٧) من بين ٢١٦٨١ مريضا، كما شخيص الأمراض المعدية البكتيرية، والفيروسية، والفطرية والأمراض المنقولة جنسيا عند ٢٠١٨ (٢٠٨٠٪) مريضا، وحب الشباب عند ١٩٧١ (٢٠١٠٪)، والتفاعلات الدوانية عند مريضا، وحب الشباب عند ١٩٠١ (٢٠٠٤٪)، والاضطرابات الصبغية مثل الحزاز المسطح والكلف والبهاق عند ٢٢٩٥ (٢٠٠٤٪)، والاضطرابات الصبغية إلى ذلك، تم الإبلاغ عن الصدفية عند ٢٧٣ (٣٠٠٪)، والاضطرابات النسيج الضام عند ١٤٥ الفقاعية عند عند ١٢٨٪)، والأمراض كانوا يعانون من الإكزيما المنقدمة والأمراض المعدية

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الاستنتاجات: أظهرت هذه الدراسة أن الإكزيما هي أكثر الأمراض الجلدية شيوعا، وتلتها الأمراض الجلدية المعدية. التحديات الناشئة لأطباء الجلدية هي منع والحد من هذه الأمراض الجلدية التي تشكل عبنا كبيرا على الرعاية الصحية، وكذلك تؤثر على نوعية حياة المرضى.

الكلمات المفتاحية: الأمراض الجلدية؛ الرعاية الثالثية؛ الإكريما؛ الالتهابات؛ حب الثان ال

Abstract

Objective: There has been a rise in the magnitude of dermatological diseases in the South East Asian region. This study aimed to determine the pattern of various skin disorders appearing in the Dermatology Department of a tertiary care hospital, which will help people to understand the scale of the rising incidence and possible preventive measures that can be undertaken to curtail it.

Methods: An observational study was conducted on all the patients who attended the Dermatology Department during a one year span. A thorough medical history with detailed cutaneous examination was carried out on every patient. Investigations and skin biopsies were performed, where required, for confirmation of diagnosis.

Results: A total of 95,983 patients presented in the outpatient Department of Dermatology, King Edward Medical University Mayo Hospital Pakistan. Out of this sample, 24,302 patients repeatedly came to the hospital for a follow up visit related to their diseases, while 71,681 were enrolled as new cases. This group comprised 58% females and 42% males; most patients were in the 20–40 years age group. Out of 71,681, eczema was diagnosed in 22,275 (31.07%), infections including bacterial, viral, fungal, sexually transmitted infections (STIs) in 20,178

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(28.16%), acne 7910 (11.03%), drug reactions 4830 (6.74%), urticaria 2910 (4.06%), and pigmentary disorders such as lichen planus, melasma and vitiligo were reported in 2739 (3.82%) cases. In addition, psoriasis was reported in 2724 (3.80%), bullous disorders in 1187 (1.66%) and connective tissue disorders in 645 (0.90%). The majority of patients presented with advanced eczema and infectious diseases.

Conclusion: Eczema was the most common skin disease seen in our study, followed by dermatological infections. The emerging challenges for dermatologists are to prevent and reduce these skin diseases that pose a major healthcare burden, as well as affect the quality of patients' lives.

Keywords: Acne; Eczema; Infections; Skin diseases; Tertiary care

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Introduction

Skin diseases are very much prevalent in the developing countries.¹ These diseases range from simple acne and scabies to various serious disorders such as Stevens-Johnson syndrome, toxic epidermal necrolysis and purpura fulminans.^{2,3} The pattern of skin diseases present varies from country to country and even from region to region within a country due to different ecological factors, genetics, hygienic standards and social customs.^{1–3}

Skin diseases can cause high morbidity but apparently less mortality.^{3–5} It is very important to remember that skin manifestations may be a clue as to the patient's internal disease, but literature on the pattern of skin diseases is deficient. Early identification of skin disease is important not only for treating patients but for preventing the spread of communicable diseases.¹ Improvements to environmental sanitation, education of the general public and good nutrition can help to reduce the incidence of skin disorders in any community.^{1,2,4,6}

Although there have been some studies on the pattern of skin diseases in the general global population, there is a paucity of such work in developing countries.^{4,7,8} The present study was planned to have insight into the frequency and types of skin disorders in that appear a tertiary care hospital to determine the burden of these diseases in our set up.

Materials and Methods

This was an observational study carried out after approval of the Institutional Ethical Committee from 1st January, 2014 to 31st December, 2014 in the Department of Dermatology, King Edward Medical University/Mayo

Hospital, Lahore, Pakistan. All patients attending the inand outpatient department (OPD) for skin problems, during this period, were included in this study. A thorough medical history and detailed cutaneous examination was performed on each patient; diagnoses were made on clinical examination. Laboratory investigations, skin scraping for fungus, Tzanck smear, smear for LD bodies, slit skin smear and skin biopsies were also carried out, if required, for confirmation of the initial diagnoses. Individuals less than 12 years of age were considered as children while those above 12 years were considered as adults. Different patterns of skin disorders were noted and compared using the data from different countries.

The data were entered into SPSS version 11 for analysis. Study variables included age, gender and skin problems. Mean and standard deviation were calculated for quantitative variables such as age, while the frequency and percentages were used to report qualitative variables such as gender and diagnoses of various skin problems. The statistical analysis was performed, and a p-value of <0.05 was considered significant.

Results

A total of 95,983 patients presented in the outpatient Department of Dermatology. Out of them, 24,302 patients repeatedly came to the hospital for a follow-up visit related to their disease, while 71,681 were enrolled as new cases. This group comprised 42% males and 58% females, with a male to female ratio of 1:1.4 — the difference was statistically insignificant (p value > 0.05). The age range noted was 2 months to 86 years with a mean of 30.4 ± 9.2 years. The majority of patients belonged to the 20-40 years of age range.

The pattern of skin diseases observed in our study has been shown in Figure 1. Out of 71,681 new cases, eczema was the most common skin disease seen, affecting 31.07% (22,275) of patients. Among these patients, contact dermatitis (mainly hand eczema) accounted for the majority of cases 72.4% (16,136), followed by seborrhoeic eczema 9.41% (2097), pityriasis alba 4.65% (1036), atopic eczema 4.33% (965), discoid eczema 3.69% (824), pompholyx 1.60% (357), lichen simplex chronicus 1.43% (320), stasis eczema 1.33% (297) and xerotic eczema 1.09% (243). Hand eczema was found to be more common in females. Seborrhoeic eczema, pityriasis alba and atopic eczema were seen mostly in children, while discoid eczema, pompholyx, lichen simplex chronicus, stasis eczema and xerotic eczema were noted in adults and the old age group.

Skin infections were seen in 28.16% (20,178) of patients. Among this group, fungal infections were the most commonly seen variety, accounting for 34.80% (7023) of cases, including tinea cruris, tinea corporis, tinea pedis, tinea capitis, tinea versicolor and candida infections. Fungal infections were also seen in the adult age group with a male preponderance. Viral infections in 29.61% of patients (5974) included herpes simplex, viral warts, herpes zoster, molluscum contagiosum, varicella and other viral exanthems. There were 0.22% (13) human immune deficiency virus (HIV)-positive patients. Bacterial infections among 27.28% of students (5504) included folliculitis, furunculosis, sycosis,

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