Pattern of Skin Diseases among the Outpatients of a Tertiary Care Hospital, Chattogram

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ABSTRACT

Background: Skin diseases are broad range of conditions affecting the skin and diseases caused by bacterial, viral, fungal infection, allergic reactions, Ca-skin and parasites. Pattern of skin disease in generally determined by various ecological factors. The prime objective of the study was to determine the pattern of skin disease among the Outpatients of Bangabandhu Memorial Hospital, Chattogram.

Material and methods: This was a retrospective type of study, was conducted in the Department of Dermatology and Venerology, Bangabandhu Memorial Hospital, Chattogram during the period from July 2022 to December 2022. A total number of 300 patients of OPD were selected as a study population. Among them, 129 patients were male and 171 patients were female.

Results: A total number of 300 patients was selected by random sampling for the study. Majority of them were female 171(57%) and 129(43%) were male. Among infective skin diseases, scabies, tinea infection, pityriasis versicolor and pyoderma was found in 12% (36), 10.66% (32), 3.33% (10) and 4.33% (13) patients respectivily. Here scabies was major presentation. Among noninfective skin diseases, eczema, psoriasis, acne vulgaris, urticaria was found in 13.66% (41), 3.33% (10), 9% (27) and 6% (18) patients respectivily. Here eczema emerged as commonest group disorders.

Conclusion: From the study it may conclude that the prevalence of non-infective skin diseases is higher than that of infective skin diseases.

Key words: Dermatology; Pattern; Skin diseases.

Introduction

Bangladesh has made significant progress in health in recent times. Most of the health indicators show steady gains and the health status of the population has improved. But the skin health status in Bangladesh cannot claim its partnership in the progress. It remains static because skin care services are still based on the century old concept which has failed to reach the whole population.¹

Skin diseases are one of the most common health issues in the developing countries, which affect all ages of people from neonate to the elderly.²

The prevalence of skin disease in the general population varies from 11.16% to 63% as seen in various studies.³ Patients in their second and third decades of age form the largest group of population (3.7% to 51.17%).⁴

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Skin diseases account for a significant public health issue in developing countries affecting 20-30% of the general population at any given time.⁵ The development of skin disease is influenced by various factors like genetic, race, religion, socioeconomic status, nutrition, personal habits, age etc.⁶ Geographical factors such as season and climate also contribute to the increased prevalence of certain type of skin disorder in a particular area.⁷ The pattern of skin diseases differs between countries and even within regions as a result of these factors. 8 Skin diseases can cause high morbidity but apparently less mortality. 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.⁹ Improvement to environmental sanitation, education of the general public, awareness regarding personal hygiene and healthy living is necessary to reduce the burden of skin diseases. Also to improve quality of life in people especially in developing nations. Prescription writing is a science and art, as its conveys the message from the prescriber to the patient. 10 Improvements to environmental sanitation, education of the general public and good nutrition can help to reduce the incidence of skin disorders in any community. 11,2,12 Although there have

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been some studies on the pattern of skin diseases in the general global population, there is a paucity of such work in developing countries.¹¹⁻¹³

The prime objective of the study was to determine the pattern of skin disease among the out patients of Bangabandhu Memorial Hospital, Chattogram, Bangladesh.

Materials and methods

This was a retrospective type of study conducted at the Department of Dermatology and Venereology, of Bangabandhu Memorial Hospital, Chattogram, Bangladesh during the period from July 2022 to December 2022. A total number of 300 patients were selected as a study population. Among them 129 patients were male and 171 patients were female. Cases with doubtful diagnosis were excluded from the study. Diagnosis was made on clinical basis. Lab investigations were done whenever required to the cases where it carried diagnostic importance.

The data regarding different variables were analyzed accordingly and performed by SPSS-17.

Results

Table I shows the distribution of patients according to type of infective disease. Among the patients 36(12%) were infected by scabies followed by tinea infection 32(10.66%), pityriasis versicolor 10(3.33%) and pyoderma 13(4.33%). Table II reveals the distribution of patients according to type of non-infective disease, eczema emerged as the commonest group of disorders 38(12.66%) followed by psoriasis 10(3.33%), acne vulgaris 27(9%), urticaria 18(6%) and miscellaneous 39(13%).

Table I Distribution of patients according to type of infective disease (n=300)

	Number of patients				
Infective Disease □	$Male \square$	Female□	Total□	%	
Scabies \square	15□	21□	36□	12.00%	
Tinea infection □	15□	17□	32□	10.66%	
Pityriasis versicolor	.□ 4□	6□	10□	3.33%	
Candidaisis□	$01\square$	$02\square$	3□	1.00%	
Pyoderma□	06□	$07\square$	13□	4.33%	
Herpes zoster□	02□	03 □	5□	1.66%	
Chicken Pox □	$01\square$	$02\square$	3□	1.00%	
Herpes simplex □	02□	$02\square$	4□	1.33%	
Warts □	02□	$04\square$	6□	2.00%	
TB skin□	$00\square$	$01\square$	1 🗆	0.33%	
$STD \square$	05□	02□	7□	2.66%	
Total□ 53	6(43%)□	67(57%) □	120□	40%	

Table II Non-infective diseases preraiting among the respondents (n=300)

	Number of patients				
Infective Disease □	$Male \square$	$Female\square$	Total□ %		
Eczema□	16 🗆	22□	38 🗆 12.66%		
Vitiligo□	$02\square$	03 □	05□ 1.66%		
Melasma□	$02\square$	$04\square$	06 2.00%		
Psoriasis □	$07\square$	03 □	10 3.33%		
Lichen Planus□	$02\square$	03 □	05□ 1.66%		
Alopecia□	$02\square$	05□	07□ 2.33%		
Acne vulgaris □	12□	15□	27 9.00%		
Urticaria 🗆	$06\square$	12□	18 6.00%		
Photosensitivity□	$01\square$	$00\square$	01 □ 0.33%		
Drug eruptions □	$02\square$	$02\square$	04 🗆 1.33%		
Chronic bullous disease ☐	$02\square$	$01\square$	03 🗆 1.00%		
Ichthyosis□	$04\square$	01 🗆	05□ 1.66%		
Nevoid disorder □	03□	06□	09□ 3.00%		
Miscellaneous□	25□	14□	39□ 13.00%		
Connective tissue disease □	$00\square$	03 □	03 🗆 1.00%		
Total □ 86 (47.78%) 🗆 94 (52.22%) □	180□ 60%		

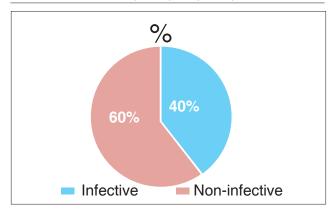


Figure 1 Distribution of the patients according to type of infective & non-infective disease (n=300)

Discussion

From this study, it was observed that non infective diseases (60%) were more than infective diseases (40%). In Indian sub-continent, infectious skin diseases are more common than non-infectious diseases. 14-15 Although in Denmark, Egypt and in Singapore dermatoses are more common and in UK pre malignant and malignant skin diseases are more common. 16-19 Female patients were found more in infectious cases 57% and male patients were found in non-infectious cases 47.78%. In infectious disease parasitic diseases were more common. This is similar to Indian study but differ from Singapore and Egyptian study. 12,18-23 Regarding parasitic diseases, scabies and pediculosis were most common. But in few Indian study they mentioned that scabies was more prevalent. 12,20-22In this study, it was found that

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36(12%) were infected into scabies followed by tinea infection 32(10.66%), pityriasis versicolor 10(3.33%) and pyoderma 13(4.33%) was found more common. This is similar to one Indian study.²² In this study, noninfective disease eczema emerged as the commonest group of disorders 38(12.66%) followed by psoriasis 10(3.33%), acne vulgaris 27(9%), urticaria 18(6%) and miscellaneous 39(13%). However, most of the result from the Indian subcontinent shows similarity to the present study result. In a study Jain et al. have reported that fungal infections is the most common skin disease which was 54.52% and eczema was 39.2%.20 Again, in another study by Rao et al. showed fungal diseases to be the most common infection (22.92%) and eczemas took an upper hand in noninfectious group (32.19%).² Likewise, Jain et al. have reported that maximum patients presented with eczema of which the most common noninfectious dermatoses (22.0%) and fungal infections are the most common infective dermatoses (13%).²⁰ However, in developed countries, the scenario was different. By reviewring various reports, it was found that almost all studies mentioned here are compatible with this reports i.e., the commonest skin disease is of infective origin, followed by allergic diseases except two reports, which show the reverse situation. 16-19,24-28 For infective dermatoses, by reviewing different studies, it is clear that the fungal or bacterial infections are the commonest infective skin disorder, instead of parasitic and protozoal infestations of this study.²⁴⁻²⁸

Limitation

It was a retrospective type of study with small sample size, which doesn't reflect the actual scenario of the whole population.

Conclusion

From this study it was found that a problem of skin diseases is existing mostly bacterial and parasitic. Among the infectious diseases it was found that most of the infective cases were with scabies and tinea infection. On the other hand, most of the non-infective cases were found as eczema only.

Recommendation

The common skin problems existing in this area are to be carefully looked for and health education regarding the hygiene, nutrition and healthy life styles is to be stressed for better standard of living.

Disclosure

Both the author declared no competing interest.

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