Original Resea	Volume-9   Issue-4   April-2019   PRINT ISSN No 2249-555X Pediatrics THE INCIDENCE OF ECZEMA IN PRE SCHOOL CHILDREN – AN ANALYSIS AT THE TERTIARY CARE CENTER
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KEYWORDS :	

## BACKGROUND

Dermatological manifestations during the childhood period include a variety of infectious and non infectious diseases. There is variation in the pattern of dermatoses, with eczemas being the most common skin disorder in developed countries and infections and infestations in the developing countries In order to monitor the pattern of skin problems in the children and to understand the relationship epidemiologic data is a necessary The pattern of all diseases in paediatric age group vary from one country to another and within the same country from one state to another due to various climatic, cultural and socio-economic factors. The infants are mostly confined to their household, while preschool children aged one to five years are exposed to their neighborhood. A quantity of kids who are admitted to the kinder garden school will have transformed pattern of dermatosis, so it can be said that the period of childhood is also one of the surrogate marker for environmental risks.<sup>(9)</sup> Skin manifestations are more common in children than adults There exist a very limited studies that have been done in South Tamil Nadu, in which the preschool children have been evaluated for skin disorders. The State of Karnataka, especially the area around this medical college has a huge number of children that belong to the pre - school age group. In view of all this we at the medical college decided to study to evaluate eczematous conditions the in preschool going children.

### MATERIALS AND METHODS

The study was a cross sectional study that was done at the Dermatology Venereology and Leprosy Department and Paediatrics Department at the for a time duration of 18 months between the months January 2017 – May 2018 on 143 children who were in the preschool age group who served as a single group. The patients were chosen based on a pre - defined criteria. The study was started after the institutions ethical clearance committee gave ethical clearance to the study. Those who met the criteria were chosen and their legal guardian who accompanied them were given a through information regarding the study and the data that was to be collected .Those cases whose patient parents/guardians were willing to give the informed consent to participate in the study and the data to be collected were enrolled in the study.

### **RESULTS AND OBSERVATIONS**

We studied 82 males and 61 females. In all the age groups males dominated females. Male to female ratio was 1.34: 1. In the socioeconomic status (KSES) distribution we found that lower middle class accounted for most of the cases 61 (42.65 %), followed by Upper lower class with 48 cases accounting for 33.56 % of the study . Rural patients comprised 99 cases (69.2 %) and the Urban patients comprised 44 cases (30.8%). The prevalence of eczema was 15%, and of those affected 83% had mild, 10% moderate, and 7% severe eczema. The most common locations of eczema in adolescence were flexural surfaces (63%), neck (50%) and extensor surfaces of extremities (39%). Among adolescents with eczema, onset was most common before age 4 years (49%), A history of eczema at every previous follow-up was seen among 22% with eczema. In adolescence, AE was more common, had earlier onset and was more severe compared with non-AE, but there were no differences in seasonal variation or location ofeczema

# DISCUSSION

Eczema is a disease that has a significant morbidity affecting children specially less than 5 years of age accounting for 12-15 percent of diseases during this period<sup>(10)</sup>

Venkata Subba Reddy et al <sup>(90)</sup> in the year 2015 in their study stated that cases were studied which showed a female preponderance with 51.4% of all children studied eczemas accounting for 32.6 percent.

Manisha Balai et al in the year 2012 on 1000 children who were in the age group up to five years of age found a total of 1027 diagnoses eczematous lesions were seen in 34.86 percent<sup>12</sup>

Yogesh Poudyal et al in stated that the incidence and severity skin lesions are influenced by the ecological area, climatic conditions and cultural factors, and social status. eczematous lesions were more common in females.<sup>13</sup>

Sadhan K Ghosh et al in their study in the year 1995 found that eczema accounted for 17.6% were the most common dermatological conditions.<sup>14</sup>

Naresh Jain al in their study in the year 2010 found that skin infections are seen in all regions both rural and urban regions but in the developed countries eczemas are common<sup>15</sup>

#### CONCLUSION

In the present study the following conclusions were observed:- skin diseases were more common in low socioeconomic status. Hence measures can be taken for overall improvement of education, job opportunities and socioeconomic status in rural areas so that there can be an improvement in the per capita income.

#### REFERENCES

- World Health Organization. Infections and infectious diseases: a manual for nurses and midwives in the WHO European Region. Copenhagen: WHO Regional Office for Europe; 2001.
- Elfaituri SS. Pediatric dermatoses in Benghazi, Libya. Indian Journal of Paediatric Dermatology. 2015 Apr 1;16(2):64.
- Sladden MJ, Johnston GA. Common skin infections in children. BMJ: British Medical Journal. 2004 Jul 10;329(7457):95.
   Guniana G. Ibadhway N. A study of dermatoses in natients attending pediatric OPD in a
- Gunjana G, Upadhyay N. A study of dermatoses in patients attending pediatric OPD in a tertiary care hospital of Gandhinagar, Gujarat, India. International Journal of Contemporary Pediatrics. 2017 Feb 22;4(2):557-60.
- Giles-Corti B, Wood L, Donovan R, Rosenberg M, Saunders J, Mills C. Opportunities and challenges for promoting health in a changing world. Health Promotion Journal of Australia. 2004;15(1):17-23.
- Jose G, Vellaisamy SG, Govindarajan N, Gopalan K. Prevalence of common dermatoses in school children of rural areas of Salem; a region of South India. Indian Journal of Paediatric Dermatology. 2017 Jul 1;18(3):202.
   Patodi RK, Sharma SK, Patodi SK, Health status of school children in some primary
- Patodi RK, Sharma SK, Patodi SK. Health status of school children in some primary schools of Indore city (MP). Indian journal of public health. 1977;21(2):71-7.\
- Asher MI, Montefort S, Björkstén B, Lai CK, Strachan DP, Weiland SK, Williams H, ISAAC Phase Three Study Group. Worldwide time trends in the prevalence of symptoms of asthma, allergic rhinoconjunctivitis, and eczema in childhood: ISAAC Phases One and Three repeat multicountry cross-sectional surveys. The Lancet. 2006 Aug 26;368(9537):733-43.\
- Nageswaramma S, Kumari GS, Rao TN, DSS SP, Swapna K, Rani JU. Skin Disoders of Childhood. IOSR Journal of Dental and Medical Sciences (IOSR-JDMS). 2015;1:7-12.
- Shrestha R, Shrestha D, Dhakal AK, Shakya A, Shah SC, Shakya H. Spectrum of pediatric dermatoses in tertiary care center in Nepal. Nepal Med Coll J. 2012 Jun;14(2):146-8.
- Reddy VS, Anoop T, Ajayakumar S, Bindurani S, Rajiv S, Bifi J. Study of clinical spectrum of pediatric dermatoses in patients attending a Tertiary Care Center in North Kerala. Indian Journal of Paediatric Dermatology. 2016 Oct 1;17(4):267.
- Balai M, Khare AK, Gupta LK, Mittal A, Kuldeep CM. Pattern of pediatric dermatoses in a tertiary care centre of South West Rajasthan. Indian journal of dermatology. 2012 Jul;57(4):275.
- Poudyal Y, Ranjit A, Pathak S, Chaudhary N. Pattern of pediatric dermatoses in a Tertiary Care Hospital of Western Nepal. Dermatology research and practice. 2016;2016.
- Ghosh SK, Saha DK, Roy AK. A clinico-aetiological study of dermatoses in paediatric age group. Indian Journal of Dermatology. 1995 Jan 1;40(1):29.
   Jain N, Khandpur S. Pediatric dermatoses in India. Indian J Dermatol Venereol Leprol
- Jain N, Khandpur S. Pediatric dermatoses in India. Indian J Dermatol Venereol Leprol 2010;76:451-4.

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