



CLINICO EPIDEMIOLOGICAL STUDY OF GERIATRIC DERMATOSES

**Nirupama
Bhagalakshmi
Tatavarthi**

Associate Professor, Department of DVL, ASRAM Medical College, Eluru, Andhra Pradesh, India

Sunkara Madhuri*

Assistant Professor, Department of DVL, ASRAM Medical College, Eluru, Andhra Pradesh, India *Corresponding Author

ABSTRACT **INTRODUCTION:** With gradual increase in life expectancy there is an increased focus on geriatric dermatology. This study was done to study the spectrum of dermatological disorders which occur in geriatric population.
MATERIALS AND METHODS: Total of 773 patients aged above 55 years attending the OPD in the department of DVL ASRAM medical college during JUNE 2017 to JUNE 2018 were included in the study. A detailed history was taken and examination was done.
RESULTS: Out of 773 patients 570 were males and 203 were females. Pruritus was the most common complaint in 78% followed by xerosis 40%, eczema (27%), infection(31%), psoriasis (10.3%), LP(3%) were some other dermatoses observed.
CONCLUSION: Better knowledge and more attention to dermatological problems in the elderly patients. We have the chance to decrease the morbidity.

KEYWORDS : geriatric, pruritus, xerosis, infections, tumours

INTRODUCTION

India is a vast country with a population of 135 billion in which around 104 million are elderly (53 million female and 51 million male) according to 2011 census. With increasing life expectancy number of elderly patients attending DVL OPD is expected to raise. Better knowledge about geriatric dermatoses will help us to reduce the morbidity of elderly. Geriatric medicine is given a lot of importance internationally. It is beginning to rise as a branch in India too. Very few studies are available in India focussing on elderly. This study was undertaken to study the dermatoses of elderly and focus on the common conditions occurring in the old people.

MATERIALS AND METHODS

Total of 773 patients aged above 55 years attending the OPD in the department of DVL ASRAM medical college during JUNE 2017 to JUNE 2018 were included in the study. Data were entered in a excel sheet and were analysed using descriptive statistics.

A detailed history of cutaneous complaints and associated illness was taken. A complete general and physical examination was carried out. Detailed dermatological examination was done. Complete blood count, random blood sugar, LFT's, RFT's was done. Wherever necessary skin scrapings, nail clippings, tzanck smear and skin biopsy were carried out.

Inclusion criteria:

1. Patients aged above 55 years attending our opd who have given consent.
2. Both males and females were included.

Exclusion criteria:

1. Patients below 55 years.
2. Patients who have not given consent.

RESULTS

Total of 773 patients above the age of 55 years were studied out of which 570(73.7%) were males and 203(26.3%) were females. Male to female ration was 2.8.

Pruritus was the commonest complaint (78%) followed by xerosis (40%).

Various dermatological problems seen in elderly patients were elaborated in table 1.

Infections were seen in (31%). Table 2.

Dermatophytosis was the most common infection followed by herpes zoster (8.5%). Psoriasis was present in 80(10.3%) .23(3%) patients

had lichen planus. Among eczema's asteatotic eczema was commonest followed by Lichen Simplex Chronicus, stasis eczema, Allergic contact dermatitis, Irritant contact dermatitis.

Pigment disorders were seen in 46(6%)cases. Vitiligo was seen in 27(3.5%) patients. Melasma was seen in 19(2.5%)patients. Benign tumours were seen in 58(7.5%) patients. BCC was seen in 1 patient. Urticaria was seen in 42(5.5%)patients. Photodermatoses in 12(1.5%)patients. Bullous pemphigoid in 4(0.5%)patients. Paronychia was seen in 4(0.5%)patients. Miscellaneous cases included are balanoposthitis, keloids, post-inflammatory hyperpigmentation, trophic ulcer, delusional parasitosis. Associated systemic illness were observed in 309 (40%)patients. Diabetes (12%) was the commonest followed by hypertension, COPD, ischaemic heart disease, renal disease, cataract, benign prostatic hypertrophy. Recurrent fungal infections were most commonly seen in diabetes patients.

DISCUSSION

In this study total of 773 patients were included. Oldest patient was 93 years old. Out of these patients 570 (73.7%) were males and 203 (26.3%) were females. Males outnumbered females which coincide with most studies.

Pruritus was the most common complaint in this study and was present in (78%) patients of which, 3% patients had senile pruritus and the rest were associated with cutaneous dermatoses. In various studies pruritus was the most common complaint.

Xerosis was present in 40% patients. Increased transepidermal water loss, reduced sebum and sweat production and decreased natural moisturising factor all lead to xerosis. It is often accompanied by asteatotic eczema.

Infections were seen in 240 (31%) patients. Superficial fungal infections were the most common (9.5%) noted in our study and few other studies. Tinea corporis was the most common followed by candidiasis and impetigo. After fungal infections most common was herpes zoster seen in 66(8.5%)patients followed by leprosy 50 (6.5%)patients.

In our study eczematous condition were seen in 27% patients. The incidence of eczema in various studies changed from 11.9% to 58%.^{1,2} Pigmentary disorders were seen in 46 (6%) cases. Vitiligo was seen in 27 (3.5%). Melasma was seen in 19 (2.5%) cases. Various studies report vitiligo between 1.2% to 19%.^{3,4,5} The overall incidence of vitiligo in india is almost 3-4%.

Psoriasis was seen in 80(10.3%) patients. The incidence of psoriasis varies in concordance with most studies.^{6,3,4,7,8,9,5} Lichen planus was

observed in 23 (3%) cases.

The benign tumors of skin were reported in 58 (7.5%) patients. Seborrheic keratosis, cherry angiomas, Dermatitis papulose nigra were commonest benign tumors in our study.

Three cases of basal cell carcinoma and one case of squamous cell carcinoma were reported in our study.

CONCLUSION

Aging is a combination of both intrinsic and extrinsic factors. Better knowledge and attention to dermatological problems in elderly patients can help us to relieve their discomfort and improve their well-being. Management of cutaneous disorders should take in account comorbidity, polypharmacy and social circumstances. In patients with chronic senile pruritus, psychogenic factors may be present which should be evaluated accordingly.

TABLE 1: Various dermatoses observed in geriatric patients:

Disease	Male	Female	Total	%
Infections	184	56	240	31%
Eczema	171	38	209	27%
Psoriasis	49	31	80	10.3%
LP	16	7	23	3%
Idiopathic guttate hypomelanoses	9	6	15	2%
Vitiligo	14	13	27	3.5%
Melasma	7	12	19	2.5%
Drug reaction	7	5	12	1.6%
Photodermatoses	10	2	12	1.5%
Paronychia	2	2	4	0.5%
Urticaria	31	11	42	5.5%
Amyloidosis	5	3	8	1%
BCC	3	1	4	0.5%
SCC	1	0	1	0.1%
Lipodermatosclerosis	3	1	4	0.3%
Benign tumors of skin	33	15	58	7.5%
Vesiculobullous disorders	2	2	4	0.5%
Miscellaneous	10	2	12	1.5%

TABLE 2 Infections Observed:

CONDITION	NO.OF CASES	INCIDENCE
Dermatophytosis	70	9%
Candidiasis	4	0.5%
Pityriasis versicolor	4	0.5%
Herpes zoster	66	8.5%
Leprosy	50	6.5%
Pyoderma	23	3%
Scabies	23	3%

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