Burden of Ichthyosis among Elderly

Bharathi.S1, Dr. Brundha2
1. Student, Second year BDS, 2. Professor, Saveetha Dental College And Hospitals, Chennai.

Abstract:
Aim: To know about the burden of ichthyosis among elderly - a questionnaire based study.
Objective: To find out the annoying features in elderly people who is suffering from ichthyosis.

Background: Ichthyosis (Ichthyoses) is genetic skin disorder. It refers to a relatively uncommon group of skin disorders characterized by the presence of excessive amounts of dry surface scales. Burdens include chronic dryness, hyperkeratosis and scaliness. Ichthyosis can be divided into two forms (syndromic and non-syndromic).

Reason: The reason of this study was to create and validate a questionnaire to evaluate the burden on elderly people affected by ichthyosis.

INTRODUCTION:
Skin disorders includes a broad range of diseases with different pathophysiology. Some of the diseases are common and caused both by hereditary and acquired factors, for example atopic dermatitis and psoriasis. Others are rare and mainly involve hereditary factors; examples are ichthyosis, epidermolysis bullosa and albinism. Depending on what aspect of cutaneous biology is affected, the symptoms will vary accordingly. Ichthyosis refers to an uncommon group of skin disorders characterized by the presence of excessive amounts of dry surface scales "fish-scale" skin and in many cases by inflammation. It is regarded as a disorder of keratinization or cornification which is due to abnormal epidermal differentiation or metabolism. Names and classification of ichthyosis are evolving with greater understanding of the molecular causes of the diseases. The common ichthyosis are Ichthyosis vulgaris (95% of all ichthyosis cases) FLG (filaggrin is a structural protein) and Recessive X-linked ichthyosis STS. Symptoms include dry, rough, scaly skin, deep and painful cracks, dizziness and thirst are also the commonly seen symptoms and these symptoms are more common in the winter. The treatment of ichthyosis is symptomatic and aims at normalisation of the stratum corneum. The treatment remains with moisturising creams containing, urea, lactic acid, etc. One classical form of treatment of ichthyosis is the application of 1-10% salicylic acid in a petrolatum base. In children, however, total body treatment with salicylic acid should be avoided, because of the risk of systemic toxicity. In a recent study, urea in a lotion base was found to be well-tolerated and highly effective in children with mild to moderate types of ichthyosis. Topical tazarotene 0.05% has recently been reported to be more beneficial in congenital ichthyosis in comparison with an ointment containing 10% urea and has also been used successfully in some patients with epidermolytic hyperkeratosis. The aim of this study was to create and validate a questionnaire to evaluate the burden on elderly patients affected by ichthyosis.

MATERIALS AND METHODS:
A random sample of 50 elderly people was selected and surveyed using a questionnaire. The questionnaire includes questions concerning the patients awareness, feelings, treatment and the patients health condition. The aim of the study is to know about Ichthyosis burden among elderly. The study questionnaire was approved by the local research ethics committee. Ethical review was not required by our institution. The interview was performed by the author among the educated and uneducated elderly patients. Datas were collected. Percentage and chi square values were calculated and the results were discussed further.

RESULT:
The questionnaire is based on the burden of Ichthyosis among elderly, which also includes questions about awareness among the elderly. Educational status is considered as the criteria for analyzing the results. Among 50 sample 32 are educated and 18 are uneducated. Ichthyosis: Out of 50 people surveyed 80% of them had Ichthyosis among which 71.9% were educated and 94.4% were uneducated and 20% was not affected among which 28.1% were educated and 5.6% were uneducated.
Rashes:
Out of 50 people surveyed 40% had rashes among which 34.4% were educated and 50% were uneducated and 60% doesn't have rashes among which 65.6% were educated and 50% were uneducated. (Fig-2)

Burning sensation:
Out of 50 people surveyed 36% had burning sensation out of which 21.9% were educated and 61.1% were uneducated and 60% doesn't have burning sensation among which 78.1% were educated and 38.9% were uneducated. (fig-3)

Causes, symptoms and treatment – awareness
Causes: out of 50 people surveyed 22% knows about the causes of Ichthyosis out of which 28.1% were educated and 11.1% were uneducated. 78% doesn't know about the causes of Ichthyosis among which 71.9% were educated and 88.9% were uneducated. (fig-4)

Symptoms: out of 50 people surveyed 34% knows the symptoms of Ichthyosis among which 37.5% were educated and 27.8% were uneducated. 66% doesn't knows the symptoms of Ichthyosis among which 62.5% were educated and 72.2% were uneducated. (Fig -5)

Treatment: out of 50 people surveyed 62% knows about the treatment for Ichthyosis among which 71.9% were educated and 44.4% were uneducated. 38% doesn't know about the treatment for Ichthyosis among which 28.1% were educated and 55.6% were uneducated. (fig-6)
Overall awareness:
Overall, 61% doesn't have awareness about Ichthyosis and 39% had awareness about Ichthyosis. (Fig-7)

Feelings:
Out of 50 people surveyed 18% were rejected due to Ichthyosis among which 6.3% were educated and 38.9% were uneducated. 82% weren't rejected among which 93.8% were educated and 61.1% were uneducated. (Fig-8)

Out of 50 people surveyed 36% felt guilty due to Ichthyosis among which 21.9% were educated and 61.1% were uneducated. 64% didn't feel guilty among which 78.1% were educated and 38.9% were uneducated. (Fig-9)

Out of 50 people surveyed 10% felt that their clothes were affected due to Ichthyosis and 10% felt that their footwear affected due to Ichthyosis and 80% felt none of the effects. (Fig-10)
Treatment:
Out of 50 people surveyed 42% undergoes treatment and 58% doesn't undergo treatment.(fig-11)

Patient’s health condition:
Out of people 50 people surveyed 16% had diabetes mellitus and 16% had hyperthyroidism but 68% had none of the health problem.(fig-12)

DISCUSSION:
This is the first study on burden of Ichthyosis among elderly. The burden and awareness study were made on more than half of the patients suffering from Ichthyosis. According to our study the awareness was less among the elderly people. And the patients who had Ichthyosis also doesn't undergo treatment due to their financial status. In the literature, only a few studies have specifically focused on ichthyosis’s prevalence. Earliest studies were conducted outside Europe (Saudi Arabia and Tunisia) and concluded to prevalence which seems different than European one because of a high level of consanguinity. In Europe, two recent Spanish studies have dealt with ichthyosis prevalence. Diabetes has not been linked to acquired ichthyosis or ichthyosis which was same as our study. 71.4% considered that ichthyosis affects clothing and footwear where in our study only 20% felt that their clothing and footwear were affected by Ichthyosis. Moreover with the current knowledge the individuals with ichthyosis should be protected against neonatal exposure to cats to prevent atopic dermatitis and should abstain from smoking to prevent asthma. They should be advised that they should not expose to factors that decreases skin barrier function and increase the risk of atopic dermatitis. Our study clearly demonstrates the burden of ichthyosis among elderly on daily life and identifies that patients doesn't have more awareness. The results will help setting up targeted measures to improve patient management and awareness.
CONCLUSION:
Chi square values were calculated about the awareness of Ichthyosis among educated and uneducated elderly people and the result was insignificant since p value was more than 0.01(table1,2,3) We can encourage our families and friends to raise awareness about ichthyosis by hosting grassroots events in their local community, handing out educational information, or simply talking to neighbors, friends and community, about living with ichthyosis. And, if possible, raising funds for the ichthyosis community and FIRST programs can also be done. Also awareness can be given through social medias, posters and through awareness programs.

REFERENCES:
1) Agneta Gånemo, Department of Medical Sciences, Section of Dermatology and Venereology, University Hospital, SE-751 85 Uppsala, Sweden © Agneta Gånemo 2002 ISSN 0282-7476 ISBN 91-554-5246-9 Printed in Sweden by Uppsala University, Tryck & Medier, Uppsala 2002
16) Noah Scheinfeld JD, MD1, Miriam Libkind MD1 and Stephanie Freilich MD2 Version of Record online: 12 FEB 2002.