

Prevalence of Skin Diseases Among Schoolchildren in Qualioby Governorate

A.El-Taweel, A.I.Mustafaand A.ElSheikh

Dermatology and Andrology Dept, Faculty of Medicine, Benha Univ, Benha, Egypt

E-Mail:Shaekhon_89@hotmail.com

Abstract

Pediatric dermatology may be a paramount limb of dermatology that bargains for those diagnosis, treatment, What's more counteractive action of skin maladies happening in infancy, childhood, and youth. Skin maladies are basic in children, those frequency continuously 9-37% everywhere the universe. The aim of the present study was to assess prevalence of skin diseases among school children in Qualioby Governorate. This investigation might have been led as An cross sectional healing center built contemplate. This contemplate that might have been led for pediatric patients suffice from different pediatric dermatoses. Patients were recruited starting with the individuals going to the outpatient facility about dermatology What's more Andrology division from claiming Benha school healing centers Throughout the period from January 2018 with January 2019 statistically non-significant difference between patients and control groups regarding socio-demographic characters. Most of our studied subjects were males [53.3%]. Main bulk of studied patients were in school age group [51.7%]. while the lowest number of studied patients were in infantile group [5%]. 25 [OH] Vit d lack might have been connected with pediatric dermatoses Also seriousness of diseases and indicated advertisement Similarly as the mossycup oak usually predominant took after Eventually Tom's perusing vitiligoand Along these lines we camwood Think as of that low serum level of 25 [OH] Vit d will be prognostic marker to a portion pediatric dermatoses in the examined assembly for egyptian patients.

1.Introduction

Pediatric dermatology may be An fundamental development something like dermatology that bargains with the individuals diagnosis, prescription also neutralizing activity from asserting skin maladies happening Previously, infancy, childhood, What's more youthfulness. Skin infections would Concerning illustration An relatable perspective secured close by children, the individuals recurrence always 9-37% all around those globe [1].

There require help various risk variables to improve men over skin illness in the pediatric population; living In addition biological including racial What's more inherited factors, dietary status, climatic exposure, outside environment, standard taboos, Additionally socioeconomic status; personage hygiene, generous pack measure Additionally over-gathering. There will be a broad assortment for skin ailments displaying over dissimilar time bunches. Those dominant part of the cutaneous infections that delayed consequence beginning with unavoidable inherited abnormalities need onset in the pediatric age-group.

Pediatric dermatoses oblige An separate viewpoint beginning with grown-up dermatoses Likewise Similarly as there compelling reason support crucial contrasts again clinical presentation, oversaw economy Furthermore prognosis. They might make transient alternately unremitting In addition recurrent, Moreover despite those truth that they would rarely lethal, they may joined with gigantic horribleness Additionally mental impact Furthermore Moreover a suggestive once their change.

2.Subjects and methods

2.1Subjects

Type of the study

This examine might have been directed Likewise An cross sectional healing center built study.

Consider Population: this contemplates that might have been directed with respect to pediatric patients torment starting with different pediatric dermatoses. Patients were recruited from the individuals going to those outpatient

facility from claiming dermatology and Andrology Branch of Benha college healing centers Throughout those time starting with January 2018 on January 2019.

Managerial Design: those contemplate might have been affirmed Toward those nearby morals panel Furthermore educated agrees were got from folks of every tyke preceding constantly selected in the investigation.

Consideration criteria: those contemplate number comprised know youngsters of 2 period aggregations; class period [6-11yrs] What's more juvenile period [12-17yrs] [Poudyal et al. , 2016].

2.2 Exclusion criteria

- Patients utilizing topical anesthesia alternately systemic help.
- Patients utilizing systemic steroids medicine in the most recent month former of the ponder.
- Patients not eager to assent for the ponder. • Patients to whom positive analysis can't make landed during.
- Patients utilizing topical anesthesia steroids required been excluded from the ponder On account current medication for topical anesthesia steroids impacts the seriousness about A percentage immune system skin sicknesses.

2.3 Methods

All patients were subjected to the following

A. Full history taking

- Personal history: name, age, sex and residence.
- Present history: onset, course, duration of dermatoses, relation to diet, relation to stress, relation to sun exposure, previous treatment, as well as history of other skin diseases.
- Family history: of any skin diseases.
- Past history: history of drug intake and medications [type, dose and duration] and history of other diseases [autoimmune diseases].

B. Clinical examination

- General examination

1. General examinations of body systems were performed to exclude associated medical conditions.

2. Body weight and height were measured using the same instrument.

• **Detailed dermatological examination**

1. Clinical assessment of skin disease had been done to determine the distribution, clinical variants and the extent of the lesions [BSA%].

2. The diagnosis of the dermatologic conditions had been made based on a detailed review of history, complete cutaneous examination and to confirm the diagnosis, the related investigations had been done whenever needed as in some cases of tineacapitis and alopecia areata we made sure of diagnosis by dermoscopy.

2.4 Statistical analysis

The gathered information were tabulated Also broke down utilizing SPSS adaptation 16 delicate ware [SpssInc,

Chicago, sick organization]. Unmitigated information were exhibited as amount What's more rates. Chi square test [X²], or Fisher's accurate test [FET] were used to examine unmitigated variables. Quantitative information were tried for typicality utilizing Shapiro- Wilks test accepting typicality during P>0. 05. Quantitative information were communicated Similarly as imply ± standard deviation In typically disseminated or median, go Furthermore IQR In not. Non parametric variables were investigated utilizing mamoncillo Whitney u test for 2 autonomous groups, Krauskal Wallis test [KWT] to various gatherings. The acknowledged level about noteworthiness in this worth of effort might have been stated toward 0. 05 [P<0. 05] might have been recognized significant].

3. Results

This study was conducted on pediatric patients suffering from different pediatric dermatoses.

Table (1) Distribution of the studied group regarding socio-demographic characters

Variable		No.	Patients [N=1200] %
Age	School children	620	51.7
	Adolescent	580	48.3
	Mean ±SD [range]		9.3±3.9 [7-16]
Sex	Male	668	55.7
	Female	532	44.3
Residence	Urban	640	53.3
	Rural	560	46.7

In the study, there were an aggregate of 1110 patients in the age group of 7 -16 years, out of which 668 [55.7%]

were males and 532 [44.3%] were females with M:F ratio 1.25:1.

Table (2) Clinical data of the studied patients.

Variable / Disease	No. [N=1200]	% 100%]	
Infectious diseases	Impetigo contagiosum	60	5.0
	Chicken box	40	3.3
	Molluscum contagiosum	40	3.3
	Warts	100	8.3
	Pediculosis	40	3.3
	Tineacapitis	100	8.3
Papulosquamous disorders	Psoriasis	60	5.0
	Dermatitis		
	Atopic dermatitis	140	11.7
	Eczema	100	8.3
	Urticarial lesions	80	6.7
Pigmentary disorders	Vitiligo	120	10.0
	Pytriasis alba	80	6.7
	PIH	40	3.3
Hair disorders	Alopecia areata	80	6.7
Miscellaneous disorders	Miliaria	40	3.3
	Acne vulgaris	80	6.7

Atopic dermatitis was the most common dermatoses [11.7%], followed by vitiligo [10.0%], wart, T. capitis, eczema [8.3%] for each, A.A, urticaria, acne vulgaris, p. alba [6.7%] for each, impetigo contagiosum,

psoriasis [5.0%] for each, miliaria, chicken pox, molluscum contagiosum, pediculosis and post inflammatory hyperpigmentation [3.3%] for each as shown in Table (2).

Table (3) Gender distribution of PDs among studied patients

Variable / Disease		No. [N=1200]	Male	Female	%	P value
Infectious diseases	Impetigo contagiosum	60	32	28	5.0	0.21
	Chicken Pox	40	24	26	3.3	0.16
	Molluscum contagiosum	40	23	17	3.3	0.4
	Warts	100	55	45	8.3	0.1
	Pediculosis	40	10	30	3.3	0.01
	Tinea capitis	100	55	45	8.3	0.3
	Papulosquamous Disorders	Psoriasis	60	33	27	5.0
Dermatitis	Atopic dermatitis	140	70	70	11.7	0.1
	Eczema	100	47	53	8.3	0.1
	Urticarial lesions	80	36	44	6.7	0.1
	Pigmentary disorders	Vitiligo	55	45	100	10.0
	Pytriasis alba	80	40	40	6.7	0.1
	PIH	40	26	14	3.3	0.3
Hair disorders	Alopecia areata	80	33	47	6.7	0.21
Miscellaneous disorders	Miliaria	40	19	21	3.3	0.45
	Acne vulgaris	80	40	40	6.7	0.1

There was no significant statistical difference on gender basis in prevalence of pediatric dermatoses [P value >0.05].

However, pediculosis was more common in female children [P 0.01].

Table (4) Seasonal distribution of PDs among studied patients

Variable / Disease		Summer	Winter	No. [N=1200]	%	P value
-Infectious diseases	Impetigo contagiosum	55	5	60	5.0	0.01
	Chicken Pox	10	30	40	3.3	0.01
	Molluscum contagiosum	30	10	40	3.3	0.03
	Warts	20	40	100	8.3	0.02
	Pediculosis	20	20	40	3.3	0.1
	Tinea capitis	67	33	100	8.3	0.01
	- Papulosquamous disorders	Psoriasis	16	44	60	5.0
-Dermatitis	Atopic dermatitis	20	120	140	11.7	0.02
	Eczema	35	65	100	10.0	0.02
	Urticarial lesions	40	40	80	6.7	0.1
	-Pigmentary disorders	Vitiligo	40	26	35	3.3
	Pytriasis alba	67	33	80	6.7	0.21
	PIH	21	19	40	3.3	0.45
-Hair disorders	Alopecia areata	39	41	80	6.7	0.1
-Miscellaneous disorders	Miliaria	40	-	40	10.0	0.00
	Acne vulgaris	40	40	80	6.7	0.1

There was a wide variety of dermatoses in various season were observed with bacterial infection being

commonest in summer and AD and eczema being commonest in winter in the present study.

4. Discussion

Pediatric dermatology is those science managing ailments and healthy skin necessities over people from conception to adolescence, An generally brief time done lifetime At huge physiological, psychological, Also development progressions occur. Those design from claiming skin ailments will be known on vary in distinctive nations of the reality What's more in distinctive areas of the same particular nation. Dermatological issues constitute in any event 30% from claiming every last bit outpatient visits on a pediatrician and 30% about at visits with An dermatologist include know youngsters [2].

This available investigation included 1200 patients anguish starting with different pediatric dermatoses. Patients were recurrent starting with the outpatient facility from claiming dermatology and Andrology Branch about Benha college doctor's facilities. Their ages went from [6-17] A long time. Youngsters arranged over 2 agdistis aggregations; one school agdistis [6-11yrs] Also juvenile time [12-17yrs]. The study might have been sanction Eventually Tom's perusing the neighborhood morals panel and educated agrees were got from folks for every kid preceding example gathering.

In the available study, there might have been statistically non-significant Contrast between patients What's more control aggregation in regards socio-demographic information. The greater part about our contemplated subjects were guys [53. 3%]. Principle mass about mulled over patients were to class age class [51. 7%]. Same time those most reduced amount of examined patients were clinched alongside childish bunch [5%] Furthermore this might attributed of the affinity from claiming guardians will counsel pediatricians to issues in their babies.

Effects for our consider were in understanding with comes about of the brazilian studyconducted Toward [3],their effects demonstrated that those most elevated recurrence of dermatologic sicknesses will be regular "around schooled kids. In any case these outcomes disagreed for [4], they news person that A large portion of the skin sicknesses were seen over pre-school age-old assembly. Also, [5],results indicated that babies constituted those biggest assembly inside the tolerant populace. , [6], observedthat adolescentgroup constitutedhighest rate Around influenced pediatric number.

These outcomes were in understanding with those comes about of the contemplate directed by [1],thatshowed thatmales spoken to 54. 7% of the contemplated patients aggregation. However,these outcomes were in contradiction for [3],results when surveying those predominance for dermatoses "around contemplated subjects they watched female predominance amongthe examined patients one assembly.

Effects of the introduce ponder uncovered thatatopic dermatitis. Might have been those The greater part incessant cutaneous presentation "around examined patients [11. 7%], accompanied Eventually Tom's perusing vitiligo[10.

0%], warts, t. Capitis, skin inflammation [8. 3%] for each, alopecia areata, urticaria, skin break out vulgaris, p. Alba [6. 7%] to each, impetigo contagiosum, psoriasis[5. 0%] to each, miliaria, chicken box, molluscumcontagiosum, pediculosis,PIH[3. 3%] for each.

These comes about were in contradiction for contemplate from switzerland directed Eventually Tom's perusing [7],they watched that atopic dermatitis [25. 9%] might have been the The majority incessant diagnosis, trailed Toward pigmented nevi [9. 1%] What's more warts [5. 0%]. While, bacterial infections were lesquerella normal [2. 88%].

Also, comes about of the display study disagreed with effects of the investigation starting with turkey directed by [8],they watched that irresistible skin maladies [27. 6%] were those practically every now and again watched accompanied by eczemas [17. 9%], skin break out [14,5%], papulosquamous ailments [6. 9%], hair illnesses [4. 1%], pigmentation issue [3. 8%], summed up pruritus [2. 8%], urticaria [2. 7%], What's more creepy crawly chomp [2. 3%].

Additionally outcomes of the current worth of effort were in contradiction with past investigations led to egypt Toward [9],their comes about showedthat the aggregation for bacterial skin contamination required those most elevated predominance rate [23. 4%] for which impetigo [22%] might have been the commonest. Parasitic infestations bunch required An rate about [20. 9%] with pediculosiscapitis shaping the greater part [17. 5%]. Shallow contagious infections were [16. 3%], trailed by eczema/dermatitis group[12. 7%],then viral infections [11. 2%],urticaria[6. 1%],sweat organ issue [4. 8%], papulosquamous issue [1. 5%], pigmentary issue [1. 1%], alopecia areata [0. 6%], genodermatoses [0. 4%]. Other skin issue were recorded [0. 8%].

Effects of the current consider disagreed for [10], examine that demonstrated that The majority kids uncovered more than person dermatosis, the greater part [76. 2%] needed not complained about infection. The mossycup oak regular sickness one assembly included considerate neoplasms [87. 0%], took after Toward pigmentary issue [68. 3%], infections [50. 9%], adnexal issue [14. 1%], excessive touchiness ailments [14. 0%], genodermatoses [0. 3%] What's more papulosquamous maladies [0. 2%]. The the vast majority ordinarily found sicknesses included, in plunging order, obtained melanocytic nevus, post-inflammatory hyperpigmentation, pediculosis, leukoderma, café au lait spots, atrophic scar, cicatricial alopecia, hypertrophic scars , pityriasis alba, papular urticaria, xerosis Also impetigo.

The variety in the frequency for certain skin infections Around investigations might rely on upon the system for order alternately might be expected should contrasts between populaces in regards genetic, socioeconomic, or Ecological factors [11].

5. Conclusion

From our study we can conclude that 25 [OH] Vit D deficiency was associated with pediatric dermatoses and severity of diseases and showed AD as the most commonly prevalent followed by vitiligo and thus we can consider that low serum level of 25 [OH] Vit D is a prognostic marker for some pediatric dermatoses in the studied group of Egyptian patients.

References

- [1] Y.Poudyal, A.Ranjit, S.Pathak, Pattern of pediatric dermatoses in a tertiary care hospital of Western Nepal. *Dermatol Res Prac*, Vol.10, PP.1120-1155, 2016.
- [2] S.Sacchidanand, M.S.Sahana, G.S.Asha, Pattern of pediatric dermatoses at a referral centre. *Indian J Pediatr*, Vol.81, PP.375-380, 2014 .
- [3] F.R.Ferreira, LFC.Nascimento and D.C.Cirvidiu, Prevalence of pediatric dermatoses in a university hospital in southeastern Brazil. *An Bras Dermatol* Vol.86(3), PP.477-482, 2011.
- [4] S.A.Jawade, V.S Chugh, SK Gohil , A clinico-etiological study of dermatoses in pediatric age group in tertiary health care center in South Gujarat region. *Indian J Dermatol Online*, Vol.60[6], PP.635-643, 2015.
- [5] S.S.Elfaouri, Pediatric dermatoses in Benghazi, Libya. *Int J Dermatol*, Vol. 16(2), PP.64-67, 2017.
- [6] V.S.Reddy, T.Anoop, S. Ajayakumar , Study of clinical spectrum of pediatric dermatoses in patients attending a Tertiary Care Center in North Kerala. *Indian J Pediatr Dermatol*, Vol.17(4), PP. 267-272, 2016.
- [7] C.Wenk and P.H.Itin, Epidemiology of pediatric dermatoses and allergies in the region of Aargau, Switzerland. *Pediatr Dermatol*, Vol.20, PP.482-487, 2003.
- [8] K.L.Hon, T.F.Leung, Y.Wong, Skin diseases in Chinese children at a Pediatric dermatology centre. *Pediatr Dermatol*, Vol.2, PP.109-122, 2004 .
- [9] Farag F.M, Hassan AA, Nassar A, Prevalence of skin diseases among infants and children in AlSharqia Governorate, Egypt. *Egypt Dermatol Online J*, Vol.8 (1), PP.4-14, 2014.
- [10] El-Khateeb EA, Lotfi RA, AbdElaziz KM, Prevalences of skin diseases among primary school children in Damietta, Egypt. *Int J Dermatol*; Vol.53(5), PP.609-616, 2014.
- [11] E.Vakirlis, G.Theodosiou, Z.Apalla, A retrospective epidemiological study of skin diseases among pediatric population attending a tertiary dermatology referral center in Northern Greece. *Clin Cosmet Invest Dermatol*, Vol.10, PP.99-104, 2017.