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Research Article

A STUDY TO FIND OUT THE PREVALENCE, CLINICAL FACTORS, PERCENTAGE & DISTRIBUTION OF AGE OF FEMALES WITH PREGNANCY HAVING DERMATOSES ASSOCIATED WITH PREGNANCY

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Abstract:

Objective: The aim of this research work is to find out the prevalence, clinical factors, percentage & distribution of age of females with pregnancy having dermatoses associated with pregnancy. These patients got referrals from Jinnah Hospital to department of dermatology of Mayo Hospital for further administration.

Methodology: Medical examination and proper assessments through laboratory carried out for all the patients in the department of dermatology. These tests carried out to make the identification of disease easy. The management of these patients carried out till the end of the pregnancy and ten week follow up after the delivery to the time uterus required to return to its normal position. This research work covers a duration of complete three years.

Results: Total forty seven females were the part of this case work. The most frequent dermatosis related to pregnancy was polymorphic eruption with 38.290% followed by pregnancy related intrahepatic cholestasis present in 25.530%, pemphigoid gestationis available in 19.140% patients, prurigo available in 8.510%, pruritic folliculitis present in 4.250% & impetigo herpetiformis available in 4.250%. The most vulnerable age group for these complications was from 21 to 30 years with 42.550%, followed by age group of 31-40 years with 38.290%, patients less than twenty years of age with 12.76% and females greater than forty years of age with 6.380%.

Conclusion: The various kinds of dermatoses can be available particularly during pregnancy period or after the child birth. It is very important for the professionals of health care departments to identify and tackle these complications to decrease the maternal as well as fetal morbidity.

Keywords: Methodology, dermatoses, pregnancy, dermatology, Victoria, Jubilee, age group, vulnerable, prurigo, intrahepatic.

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INTRODUCTION:

There are many changes in the body of females during the period of pregnancy which affects many organs of the body as well as skin of females. The dermatoses in the period of pregnancy are the direct outcome of gestation and their classification carried out as pathologic procedures. A large amount of complications of skin are the outcome in the period of pregnancy whereas these problems which are the induction of pregnancy are the pregnancy dermatoses. Some of the important skin disease as observed in the pregnant females were polymorphic eruption due to pregnancy, intrahepatic cholestasis because of pregnancy, pemphigoid gestationis, prurigo, pruritic folliculitis & Impetigo herpetiformis.

There are many confusing names of the inflammatory dermatoses particular to the period of pregnancy. But there is well understanding of the characterization, clinical factors, and diagnosis of disease and impact of the results of pregnancy for some complication of dermatoses. There are no definite reasons of various anomalies of dermatoses but these complications of skin have relation with the hormonal alterations and reaction of conception's product.

METHODOOGY:

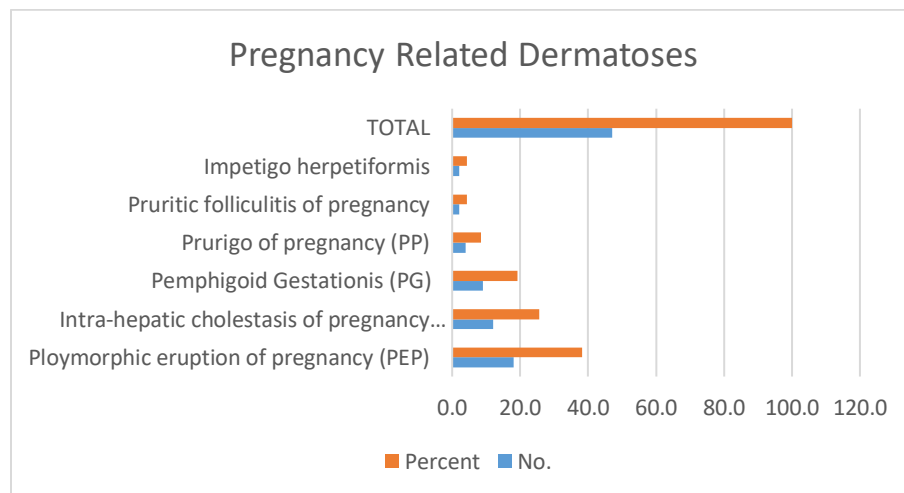
This is a prospective research work. This research work conducted in the department of dermatology of Mayo Hospital, Lahore, Pakistan. This study covered a period of complete 3 years. All the new case of skin issues in the period of pregnancy were the part of this research work. These pregnant females attended the outpatient department of the Jinnah Hospital and got referral for the department of dermatology of Mayo Hospital, Lahore. The specialist in the field of dermatology examined all the patients and a consultant. The record personal and medical information of the patients as medical factors, exacerbating features, and distribution & involvement locations maintained. We also recorded the age at the start of this complication as described in Table-1 & Table-2.

RESULTS:

Forty seven females with pregnancy were under examination in the department of dermatology in the duration of complete three years of this case work. The distribution of various skin complications because of pregnancy & the patient's age at the time of appearance are available in Table-1.

Table-I: Percentage of different pregnancy related dermatoses

Condition	No.	Percent
Ploymorphic eruption of pregnancy (PEP)	18.0	38.290
Intra-hepatic cholestasis of pregnancy (ICP)	12.0	25.530
Pemphigoid Gestationis (PG)	9.0	19.140
Prurigo of pregnancy (PP)	4.0	8.510
Pruritic folliculitis of pregnancy	2.0	4.250
Impetigo herpetiformis	2.0	4.250
TOTAL	47.0	99.970

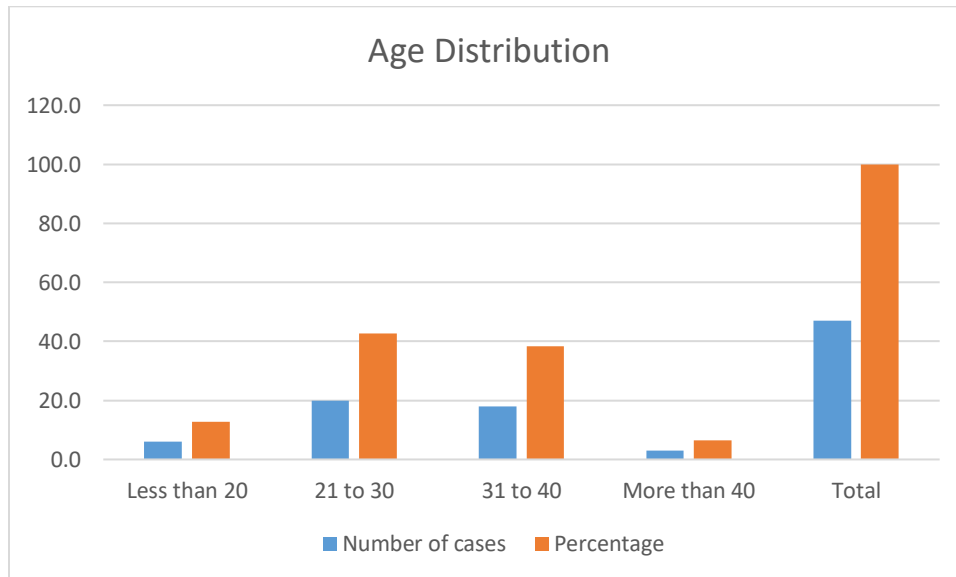


Polymorphic eruption in the duration of pregnancy was the most frequent type of dermatoses available in 38.290% patients followed by during pregnancy intrahepatic cholestasis present in 25.530% pregnant females, pemphigoid gestationis was available in 19.140% patients, pregnancy's prurigo was available

in 8.510% patients, pruritic folliculitis and impetigo herpetiformis were the common complications of skin 4.250% patients of this case work. Table-2 is describing the distributions of the dermatoses in accordance with various groups of age.

Table-II: The age group distribution of various dermatoses

Age Group (Yrs.)	Number of cases	Percentage
Less than 20	6.0	12.8%
21 to 30	20.0	42.6%
31 to 40	18.0	38.3%
More than 40	3.0	6.4%
Total	47.0	100.0%



DISCUSSION:

There are very limited case works on the occurrence, prevalence and past history of the dermatoses associated with the period of pregnancy. In current case work, we discussed the prevalence, percentage and distribution of the diseases in accordance with the age groups for a period of complete three years. The most common dermatosis during the pregnancy duration was PEP (38.290%). Same results were the outcome of past works on the same subject [1]. What are the reasons of this condition? The answer of this question is still not available. But these complication may occur due to association with the disorder of autoimmunity. Multiple gestations and gain of weight during the period of pregnancy can be cause of some complications [2]. There is suggestion that anomalous distention of the skin causing damage to skin may

perform a vital role in the formation of this complication of PEP [3].

We were not able to determine any abnormalities of hormones in the examination of laboratory. Most of the infected pregnant females were prim-gravida and available in last three months of their pregnancies, they appeared with severely pruritic papules & plaques, starting from the abdomen and then go slowly to buttocks, thighs and chest of the pregnant females. The face, palms and soles of feet are not the affected areas in this case. The identification of the issue was mainly clinical. The mitigation of the complication after the child birth also ensured the diagnosis of the PEP. ICP was the next common dermatoses complication linked with pregnancy with 25.530% patients. The cause for the high occurrence was that

greater than 50.0% patients were belonging to the expatriate people from Subcontinent and East, who were available with high occurrence of HCV infections. The serology of hepatitis C was positive in seventy two percent patients describing a strong association with the presence of hepatitis C. Recently, work have confirmed this association [4, 5].

Some of the other reasons of cholestasis are the maternal intrahepatic dysfunction of bile secretion. Intense pruritus can characterize this diseases that normally starts in the last three months of the pregnancy period. That pruritus is very constant naturally but majority of the patients found with complaints of worse condition in night times and very serious on the soles and palms of hands. Excoriations were the cutaneous outcomes concerning various body parts like back portion and belly. The findings of laboratory contained small enhanced levels of transaminase levels, whereas the level of alkaline phosphatase was much high, the cause being the involvement of alkaline phosphatase inside from placenta. But the traits of the samples and assessment methods can be different in different case works and the results of those works may vary depending upon the methods in use and the occurrence of HCV infections among the sample population. Pemphigoid Gestationis was responsible for 19.140% patients. It is very hard to discriminate this disease from PEP.

The abrasions then develop to a comprehensive bullous eruption that normally leave face, soles, mucous membranes & palms [7]. In this current case work, one patient was available with the involvement of face. The eruption of the skin may have an association with the extreme erosions & exfoliation. These diseases spreads in the latter half part of the pregnancy period and ignites themselves near the delivery of after the child birth in more than 60.0% patients. Twenty percent patients appeared after the child birth for the very first time. Majority of the patients get rid of this problem in one month after child birth except one patient who was available with itching ten weeks after the child birth.

Prurigo in pregnancy duration was available in 8.510% patients and this complication was available at the time of pregnancy. This disease was also present on various part of the pregnant females. The outcomes of this complication as diagnosed by this case work are similar to the case works of the past [8]. Pruritic folliculitis was also present in 4.250% pregnant females who appeared with the red & follicular papules. These were also available on various parts of the females as breasts & buttocks. This complication

was much common in the first six month of the pregnancy period. Sometimes, abrasions look like monomorphic acne normally recovering within two weeks after the child birth [8, 9]. There is no presence of the anomalies of hormones in this situation [10]. The variations in the outcome of various caseworks are the result of the different ethnic groups, samples of population and the prevalence of HCV infection in those particular areas.

CONCLUSION:

The complications of skin are very common because of hormonal alterations in the period of pregnancy. An elaborate previous history and knowledge of medical appearance to the professionals will support the early diagnosis, adequate examination through laboratory and effective treatment which will to decrease the complications of skin in period of pregnancy and it will also reduce the morbidity rate of mother as well as fetal.

REFERENCES:

1. Zoberman E, Farmer ER. Pruritic folliculitis of pregnancy. *Arch Dermatol* 1981; 117(1):20-22.
2. Aractingi S, Berkane N, Bertheau P, et al. Fetal DNA in skin of polymorphic eruptions of pregnancy. *Lancet* 1998; 352 (9144):1898-1901.
3. Reyes H. The enigma of intrahepatic cholestasis of pregnancy: lessons from Chile. *Hepatology* 1982;2(1):87-96.
4. Fox GN. Pruritic folliculitis of pregnancy. *Am Fam Physician* 1989; 39(3): 189-93.
5. Beckett MA, Goldberg NS. Pruritic urticarial plaques and papules of pregnancy and skin distention. *Arch Dermatol* 1991;127:125-6.
6. Charles-Holmes R. Polymorphic eruption of pregnancy. *Semin Dermatol* 1989; 8:18-22.
7. Locatelli A, Roncaglia N, Aarreghini A, et al. Hepatitis C virus infection is associated with a higher incidence of cholestasis of pregnancy. *Br J Obstet Gynaecol* 1999;106(5): 498-500.
8. Shornick JK, Bangert JL, Freeman RG, Gilliam JN. Herpes gestationis: clinical and histologic features in twenty-eight cases. *J Am Acad Dermatol* 1983;8(2):214-24.
9. Kroumpouzou G, Cohen LM. Dermatoses of pregnancy. *J Am Acad Dermatol* 2001; 45(1): 1-22.
10. Black MM. Prurigo of pregnancy, papular dermatitis of pregnancy and pruritic folliculitis of pregnancy. *Semin Dermatol* 1989; 8(1): 23-5.