Prevalence of various mucocutaneous disorders in HIV positive patients

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Abstract
Background: Skin is among the most commonly affected organ in HIV infected patients. There are diverse ranges of non-infectious as well as infectious skin lesions that manifest during the course of this disease and frequently this may be the earliest and the only clinical presentation of HIV infection. Methods: During the study duration of one year, newly diagnosed HIV positive patients on screening and attending the hospital for further management and care were included in the study. The skin symptoms were recorded and detailed examination of skin in broad daylight was done. Results: There were 69 males and 32 females in the study population. The age range was between 19 and 69 years. A total of 101 new cases of HIV positive infection were seen, and 62 had symptoms and signs of mucocutaneous disorders on their very first day of attending the adult HIV clinic. Patients having one, two, or three skin diseases were 34, 17, and 3 respectively. Herpes zoster was the most common infectious skin disease followed by mucocutaneous candidiasis. Seborrhoeic dermatitis was the most common non-infectious presentation of skin disease. Conclusion: There is a high prevalence of skin disorders in HIV infected patients and there are diverse presentations of skin infection in these patients.
Keywords: Herpes zoster, AIDS, Mucocutaneous candidiasis, Seborrhoeic dermatitis.

INTRODUCTION
Skin is among the most commonly affected organ in HIV infected patients. There are diverse ranges of non-infectious as well as infectious skin lesions that manifest during the course of this disease and frequently this may be the earliest and the only clinical presentation of HIV infection ¹, ². There is a wide spectrum of infectious as well as non-infectious skin disorders of HIV infection and their frequency patterns and the associated factors have been shown to vary from region to region ³. Present study was done to describe the prevalence of various mucocutaneous disorders in HIV positive patients attending the hospital during the study duration.

METHODS
During the study duration of one year, newly diagnosed HIV positive patients on screening and attending the hospital for further management and care were included in the study. The skin symptoms were recorded and detailed examination of skin in broad daylight was done. Old patients attending the unit prior to the onset of the study; also those patients that came from different HIV centres for continuation of their HIV care were also excluded; patients who were on either primary or secondary prophylaxis for various opportunistic infections were also excluded from the study. To avoid bias due to alteration in skin pathology due to medications, patients who were on any drugs for systemic disease were also ruled out.
RESULTS
There were a total of 101 patients. There were 32 males and 69 females in the study population with a male: female ratio of 1: 2.15. The age range was between 19 and 69 years. Out of 101 patients, 62 patients (61.4%) had symptoms and signs of mucocutaneous disorders on their very first day of attending the adult HIV clinic. Patients having one, two, or three skin diseases were 34, 17, and 3 respectively. Herpes zoster was the most common infectious skin disease followed by mucocutaneous candidiasis. Seborrhoeic dermatitis was the most common non-infectious presentation of skin disease.

Table 1: Skin and Mucocutaneous Manifestations in HIV Positive Patients

<table>
<thead>
<tr>
<th>Infectious disorders</th>
<th>Number</th>
<th>Non-infectious disorders</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Herpes zoster</td>
<td>34</td>
<td>Seborrhoeic dermatitis</td>
<td>9</td>
</tr>
<tr>
<td>Mucocutaneous candidiasis</td>
<td>28</td>
<td>Pruritic popular eruptions</td>
<td>5</td>
</tr>
<tr>
<td>Dermatophytosis</td>
<td>11</td>
<td>Mucosal Lichen Planus</td>
<td>2</td>
</tr>
<tr>
<td>Molluscum contagiosum</td>
<td>9</td>
<td>Lichen simplex chronicus</td>
<td>1</td>
</tr>
<tr>
<td>Scabies</td>
<td>6</td>
<td>Drug rash</td>
<td>1</td>
</tr>
<tr>
<td>Pyoderma</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Herpes progenitalis</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chancroid</td>
<td>1</td>
<td></td>
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</tr>
</tbody>
</table>

DISCUSSION
In our study, it was found that the majority of the patients were females with a male: female ratio of 1: 2.15. Similar to our results, a higher female proportion was reported by study done by Salami et al. in Nigeria and also by the study by Glynn et al. in Kenya. In the study, greater than half (61.4%) of the newly diagnosed HIV positive patients had skin disorders. Study by Mawenzi et al. done in the newly diagnosed HIV positive patients in Kenya found a prevalence of 42.1%. Nnoruka et al. obtained a prevalent rate of 93.5% in southeast Nigeria whereas in Sanandaj city, Pakistan, it was as high as 94.3%. In this study, majority of our patients showed infectious skin manifestations and the most common lesion was that of herpes zoster. Study by Jindal et al. has also reported similar results. However, reports of oral candidiasis and dermatophytosis being more common have been reported from other regions by the authors.

To conclude, there is a high prevalence of skin disorders in HIV infected patients and there are diverse presentations of skin infection in these patients.

REFERENCES