



Abstracts for the 12th Scientific Conference of the Nigerian Association of Dermatologists, Ile-Ife 2018

The Need, Challenges and Future Direction of Research in Nigeria

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Equipment and material will often be in short supply in the West African sub-region. First class brains and motivation abound and with guidance and focus quality research can be done.

Boring, repetitive studies – in different zones / towns should be avoided / discouraged such as “Acne in Kano”, “Acne in Oshogbo”, “Acne in Aba”

Keen observation by Dr James **Lind** (scurvy) 1747 - 1795 and Edward **Jenner** (small pox) , 1749-1823 have contributed to great leaps in science.

Even basic equipment with great motivation can lead to breakthroughs (Dr Ngu and filariasis).

The role of red mud /earth has been documented and shea butter mentioned as possible sun screens.

Dr Stanley George **Browne** has done much in Nigeria our very own country. From Uzuakoli over 40 papers have been pushed out. Much of the trials of

Clofazimine were done in this zone. The use of drops of methylated spirit is simple but it tests Temperature and touch perception in the leprous patient!

George H.V. **Clarke** in the 1950's gave a list of dermatology problems in the West African sub region and some still require solutions.

Some problems (acne keloidalis) are almost exclusively localized to this area and solutions will have to come from researchers here.

Collaboration allows better and more credible studies and also reduces overall cost to each participant (Acne keloidalis, George A.O et al, Linea nigra and Prostate cancer: Otiike-Odibi, George et al)

Epidemiology is a useful less costly tool to apply as a first stage in some studies e.g. Lind and scurvy.

In conclusion credible meaningful research can be done from this part of the world.

“Ethnic Hair and Scalp Disorders in Africa: Any Change in the 21st Century”

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Hair and scalp disorders are common in the dark skinned for various reasons Factors responsible for these disorders include genetics, hair care practices, hair grooming methods, structure of the hair and hair follicle. Infections contribute to the hair disorders seen in the young. Unfortunately, disorders of the hair and scalp impact the quality of life of an individual especially in this environment. The importance of scalp hair in our environment can be evaluated by the huge numbers of hair care products available in the market .The use of hair extensions confirm the desire to have long bouncy hair.

Over the last few years hair grooming practices and hair care practices with deleterious effects to the hair and scalp are being modified with the hope of reducing the incidences of these disorders.

Mutations in the keratin gene have been associated to some of these hair disorders and associations of hair disorders such as folliculitis nuchae and the metabolic syndrome seems to be getting stronger. Disorders of hair grooming such as pseudofolliculitis barbae appear to have reduced while the prevalence of huge tumours from acne keloidalis have reduced. It is not clear if alopecia resulting from hair care practices have indeed reduced. Community studies are needed to verify this.



Sub-Saharan Africa Skin Knowledge

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The human skin is the body's protective barrier against environmental hazards including solar ultraviolet radiation. Black skin is typically differentiated from other skin types based on its melanin content and dermoepidermal junction morphology. Using qualitative and quantitative techniques, we have assessed the characteristics of black skin in United States, Europe and Africa to define the biological specificities which contributes to the clinical manifestations in black skin compared to other skin colors. Key learnings from our findings highlight the difference in the major skin issues, delineated by skin color. For example, our black cohort compared to other skin types presented with higher levels of skin dryness. Also, Black skin is susceptible to UVA-induced pigmentation (tanning) and the increased sun intensity in Africa (e.g. in Ivory Coast- higher UVR exposure vs France-lower UVR exposure country) is accompanied with significant increase in hyperpigmentation complaints in the black population. However, in regards to skin sensitivity, the prevalence (around 52%) and presentation of the different characteristics of skin sensitivity (i.e. itching,

prickling etc.) was similar in all skin colors (Black, Asian and White skin). In addition to defining major skin issues, we probed solutions using sunscreens, soothing and restoring lotions which were tested *in vivo* and using our novel reconstructed skin *in vitro*. We quantified increase in pigmentation then assessed photoprotection by sunscreens with different sun protection factors (SPF,) UVA-protection factor (UVA-PF) and combinatorial SPF/UVA-PF protection. Changes in pigmentation were assessed by visual grading and objectively using a reflectance spectrophotometer. All the results indicate that regular sunscreen usage can improve dyschromia in dark individuals and in particular, a sunscreen with UVA absorption potency is more effective. For skin sensitivity itchiness, tingling, prickling and skin dryness issues, our solutions were able to resolve majority of the issues within 7-28days. Future research on black skin focuses on utilising the reconstructed skin model to deepen our understanding of other disease/aging states, probing the distinct involvement of different skin cells (keratinocytes, melanocytes, fibroblasts) and secretions.

Re-emerging Tropical Skin Diseases: What's Topical?

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ABSTRACT: Emerging infectious diseases refer to newly identified and previously unknown conditions that cause public health problems either locally or internationally; Re-emerging infectious diseases include previously known entities, whose proportions had dropped to such low levels that they were no longer considered a public health challenge, but have reappeared with an increasing trend in incidence or prevalence.

Myriad factors affect the re-emergence of infectious diseases, a good number of which are prevalent in, or characteristic of the tropics which is already a zone where infections thrive and preponderate.

The skin acts as a non-specific defence against external invasion by pathogens. The warm and humid environment of the tropics promotes both the proliferation of microorganisms, and the enhanced

susceptibility of the skin to assaults by these agents.

The skin is an entry point for the vast majority of infections/infestations, may reveal the presence of an ongoing infective disease, and the often observed skin manifestations of these diseases are the major reasons for morbidity and stigmatization.

A common feature previously shared by both skin and tropical diseases (particularly those categorized as 'neglected tropical diseases' [NTD]) was their tendency to be ignored by international organizations, pharmaceutical industries, global health policy makers, and public-private partnerships.

With the current global focus on the eradication of NTD, the role of the dermatologist in achieving this goal cannot be overemphasized, thus the need to acquaint ourselves with tropical skin diseases especially those with public health significance.

Monkey Pox Disease in a Nigerian Prison

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BACKGROUND: Monkey pox disease is a rare viral disease that occurs mostly in Central and West Africa caused by infection with the monkey pox virus. Transmission occurs when a person comes into contact with the virus from an infected animal or human, or with materials contaminated with the virus. This can be through broken skin, the respiratory tract or mucous membranes

OBJECTIVES: To report the outbreak of monkey poxvirus infection in one of the prisons in Nigeria. To identify risk factors, relationship between imprisonment, prison environment and monkey pox virus infection.

METHOD: All 300 inmates in this prison with skin lesions were subjected to clinical examination by the Prison's medical staff for monkey pox and other skin diseases. A make shift isolation centre was created

for the suspected cases. Blood samples were taken from fifteen (15) suspected cases identified using NCDC Monkey pox standard case definition criteria.

RESULT: Four (4) inmates of Awaiting Trial Male (ATM) category (who have been in prison for 2months to 12months before their presentation) were confirmed to have Monkey pox virus disease and are receiving treatment according to the NCDC case management protocol. Inmate population with skin diseases were 7.5%. Ratio of monkey pox to skin Disease is 4:300= 1.67%.

CONCLUSION: Monkey pox virus disease in the prison population appears to represent incarceration infection.

Keywords: Monkey pox disease, Inmates, Skin diseases.

Dermatological Dermatoses In Elderly Patients Seen In A Private Facility In Enugu, Nigeria

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BACKGROUND/INTRODUCTION: Elderly people are vulnerable to a wide variety of dermatological conditions as a result of degenerative and metabolic changes which occur throughout the skin layers as part of the aging process. These diseases prove challenging in terms of diagnosis, management and follow-up. Manifestation of these skin diseases in the aged population differ from country to country. This study aims to identify common dermatoses seen in the elderly population in Enugu State, Nigeria.

METHODS: A retrospective analysis of clinic records of patients aged sixty years and above, seen in a private dermatology facility in Enugu from January 2013 to May 2018 was done. Data collected on patients' gender, age and diagnosis were entered into SPSS Version 20 and analyzed. Diagnosis was based on clinical findings, laboratory diagnosis including biopsy and histopathology were requested

when necessary to make a diagnosis.

RESULTS: A total of 69 patients were seen, 35 males (50.7%) and 34 females (49.3%). The mean age of patients was 70.45(±9.180). The most common skin disorder among these patients were infections/infestations (24.3%) followed by eczemas (17.3%) and papulosquamous diseases (psoriasis and lichen planus) were seen in 13% of cases. There was no significant association between gender and dermatoses disease although all cases of post bleaching pigmentation were only in females (5.8%).

CONCLUSION: Infections are a major cause of dermatoses in the elderly and accurate diagnosis of these dermatoses, especially in the presence of multiple co-morbidities and different drug regimens, will help in appropriate drug selection and management of these patients.

Dermoscopic Findings in Traction Alopecia in Female Students in Secondary and Tertiary Institutions in Ibadan: A Preliminary Study

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BACKGROUND: A dermatoscope is an instrument used to examine the skin, study pattern of hair follicles and examine their densities. Dermoscopy is said to be useful in the diagnosis and follow up of hair and scalp disorders. There are very few studies on dermoscopy and these are mainly in Caucasians. The use of dermoscopy may contribute to understanding the pathogenesis of hair disorders.

Objectives: The aim of this study was to find the dermoscopic findings in traction Alopecia in females in some educational institutions in Ibadan.

METHODOLOGY: The respondents were interviewed using a pretested questionnaire containing information about their biodata, hair care

practices and history of hair loss if any. Subjects scalp were examined using a dermatoscope.

RESULTS: Out of the 450 participants studied 210 had Alopecia (46.7%). 67 (31.9%) of those with Alopecia had significant dermoscopic findings.

CONCLUSION: Dermoscopic findings in traction Alopecia in this study included peripilar sign, pilar casts, perifollicular erythema. Interfollicular spacing between the hair shafts measured in normal scalp ranged from 3.81mm-4.21mm with a hair shaft diameter of 1.54mm while in the alopecic scalp, measurements ranged from 3.10mm-8.43mm and shaft diameter was 1.03mm.

Key words: Dermoscope, Alopecia, Ibadan

Epidemiologic and Clinical Differences Between Classic and Hypertrophic Lichen Planus in Nigeria

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BACKGROUND: Lichen planus is a chronic inflammatory skin disease known to have several clinical variants with attended variable clinical complications. The hallmark of these complications have been identified to include chronic inflammation induction and oxidative stress.

OBJECTIVES: To identify the demographic and clinical differences between the classical and hypertrophic lichen planus and their clinical correlates.

METHODS: 104 participants with lichen planus, 49 with classic and 55 with hypertrophic lichen planus included. Demographic and clinical information were obtained. Diagnosis of lichen planus was made clinically and confirmed with histology. Participants were screened for metabolic syndrome, hepatitis B and C.

RESULTS: Mean age of all patients was 37.20 ±13.39 years, no age and gender differences between

participants with classic and hypertrophic lichen planus. Classic lichen planus was more likely to be painful, (8.2% vs 0.0, p=0.046), generalized (95.9% vs.16.4%, p<0.001), involve the oral mucosa (38.8% vs 0.0, p<0.001), the nails (38.8% vs 1.8, p<0.001), present with kobnerisation (55.1% vs 5.5%, <0.001), Wickham striae (69.4% vs 16.4%, p<0.001), associated with Hepatitis B vaccination (16.3% vs 3.6%, p<0.028) and anti HCV positivity (16.3% vs 0.0%, p=0.002). However, hypertrophic lichen planus was significantly associated with diabetes mellitus (16.4% vs 2.0%, p=0.013), dyslipidemia (74.5% vs 40.8%, p=0.001) and saw tooth histologic appearance on histology compared to classic type.

CONCLUSION: Hypertrophic lichen planus is more likely to be associated with dyslipidemia and diabetes mellitus compared to classic type. While classic type presents more as a generalized disease with affinity for mucosa and nail affectation.

The Usefulness of Combining Podophyllotoxin Solution and Electrofulguration in the Treatment of Genital Warts

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BACKGROUND: Genital warts are sequel of contagious sexually transmitted disease frequently caused by type 6 and 11 of the human papilloma virus (HPV). About 90% of those who contract HPV will develop genital warts. The podophyllotoxin solution/gel appears to be less effective in treatment of genital warts particularly the keratinized type, hence, the combination of electrofulguration and podophyllotoxin for better treatment outcome.

OBJECTIVE: To assess the effectiveness of combining 0.5% podophyllotoxin solution and electrofulguration verses 0.5% podophyllotoxin solution alone in the treatment of genital warts.

METHODS: Subjects who were diagnosed with genital warts were offered various treatment options bearing in mind the number of warts, its diameter, site of occurrence and whether it is keratinized or non-keratinized. Treatment included 0.5% podophyllotoxin application and electrofulguration. Application of

podophyllotoxin solution was supposed to be used daily by the patient and assessed after 6 weeks. The energy used during electrofulguration ranged from 30-70volts/sec depending on the surface area involved. (Neo Fracator, AOKI technologies machine). Subjects were followed up at 3 months, 6 months, and 12months for possible relapse of symptoms.

RESULTS: The ratio of male to female was (1:1.1) and the mean age for male to female was 33.0 ± 5.5 years and 22.1 ± 6.3 years respectively. Subjects who were treated with podophyllotoxin solution had unsatisfactory outcome after 6 weeks of follow up while outcome became very satisfactory when combined with electrofulguration. Voltage energy delivered for male and female subjects were averagely 36 volts/sec and 45 volts/sec respectively.

CONCLUSION: There was better response when podophyllotoxin solution was combined with electrofulguration.

Tinea Capitis in Adults: Case Series and Review of Literature

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INTRODUCTION: Tinea capitis, a common dermatophyte infection of the scalp and hair, is seen predominantly in males in their 1st and 2nd decades of life. It is uncommon after puberty and when it occurs, the presentation may not always be typical and often misdiagnosed as inflammatory scalp disorders such as dissecting folliculitis.

METHODOLOGY: This is a retrospective review of cases of tinea capitis in adults seen over a 6 year period at the Lagos University Teaching Hospital (LUTH). Data extracted from patients' clinic records. Twenty-four cases were identified with the initial diagnoses of tinea capitis in patients over 16 year old. However, 9 cases with either positive microscopy or culture or both were included in the series.

RESULTS: 7 patients clinical diagnosis of tinea capitis above age 18 years over the study period. All

were males with age range between 26 and 68 years; mean age was 44.7 ± 13.4 (Standard deviation SD). Duration of treatment was between two weeks and 60 weeks; mean duration was 24.3 ± 27.8 (SD). Potential predisposing factors were use of topical steroids, sharing of clippers at barbing salon, contiguous spread from other parts of the body. All patients reported had presence of hyphae on potassium hydroxide microscopy. Culture on Sabouraud's agar showed only *Trichophyton species* (*T. mentagrophytes* and *T. rubrum*).

CONCLUSION: Although tinea capitis may be rare in adults, unnecessary investigations may be performed and inappropriate treatment prescribed if the possibility of dermatophyte infection is not considered, hence a high index of suspicion is needed.

Keywords: Tinea capitis, Adults, *Trichophyton species*,

Investigating Barriers and Challenges to Integrated Management of Neglected Tropical Skin Diseases in an Endemic Setting in Southern Nigeria

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BACKGROUND: With a dearth of experience in and evidence for cost-effective integrated community-based management of skin neglected tropical diseases (NTDs) in Nigeria, this study aimed to assess knowledge, attitude and care-seeking practices with a view to introducing appropriate community-based interventions for skin NTDs in Ogbaru LGA, Anambra State.

METHODS: Mixed-methods design consisting of cross-sectional surveys and focus group discussions (FGDs).

RESULTS: The survey was completed by 353 community members (61.8% female) and 15 HCWs (100.0% female), while 52 individuals participated in the six FGDs. Of the 353 respondents, 213 (60.3%) reported that the diseases were caused by witchcraft/curse. Regarding prevention, 272(77.1%) respondents believed that transmission of these diseases can be prevented. However, 241(68.3%), 298(84.4%) and 332(94.1%) suggested that

avoiding handshake with affected persons, avoiding swimming in rivers/swamps and wearing protective footwear in swampy farm, respectively are not preventive. Regarding care seeking practices, 197(55.8%) would first visit the health centre/hospital, 91(25.8%) traditional healer, 35(9.9%) pharmacy/patent medicine vendor and 28(7.9%) prayer houses. Furthermore, 324(91.7%) desired active community engagement for their control. Overall, 332(94.1%) expressed interest in being taught self-care practices. Prominent themes in the FGDs were belief in witchcraft and herbal remedies; as well as occurrence of physical, social and economic distress.

CONCLUSION: Our study helped quantify the information gaps that need to be addressed in order to create demand for integrated skin NTDs services in Nigeria. Challenges to access and delivery of services were identified. Community and HCW's empowerment and engagement through outreach and regular training, may alleviate these challenges.

Case Report of The Effectiveness of Laser Tattoo Removal Treatment in Nigerian Patients

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INTRODUCTION: Body tattooing is done by different individuals for various purposes. It has been documented that, after a few years, people want to have their tattoos removed. The Q-Switched 1064 and 532 are used for tattoo removal. Tattoo removal is a new procedure in Nigeria. How effective the procedure is, is not known. We present 2 cases of eyebrow tattoo removal.

CASE REPORTS.

Case 1. A 45year old female presented to the clinic for eyebrow tattoo removal. She had tattooed her eyebrow 2 years before presenting at the clinic. She was treated every 4 weeks with the Q-Switched 1064 with fluence of 5.0, 5.3 and 5.5, Rep rate of 2. So far

she has 3 sessions with significant reduction in tattoo intensity and patient is happy with effect.

Case 2. A 60 year old lady who had microblading on a previous eyebrow tattoo of 10 years duration. Reason for removal was dislike of the shape. She was treated every 4 weeks with the Q-Switched with fluence 2.8, 3.2 and 3.8, Rep rate of 2. She had 3 sessions with significant improvement. Patient discontinued the procedure because of cost.

CONCLUSION: Laser tattoo removal is effective and safe in Nigerians.

Key words: Laser, tattoo removal, q-switched 1064.

Metabolic Syndrome and Dyslipidemia in Nigerian Patients With Lichen Planus

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BACKGROUND: Lichen planus (LP) is an inflammatory skin disease of unknown etiology associated with chronic inflammation, oxidative stress induction, and cardiovascular risk factors.

OBJECTIVES: To document the prevalence of metabolic syndrome (MetS), dyslipidemia and associated factors in Nigerian patients with lichen planus.

METHODS: cross-sectional design made to evaluate 90 subjects with LP and 90 controls for MetS and dyslipidemia in two Nigerian Teaching Hospital. Diagnosis of LP was made with the aid of histology, and MetS and dyslipidemia were diagnosed using the NCEP-ATP III criteria.

RESULTS: The prevalence of MetS was insignificantly higher in LP than control (18.9% vs. 13.5, $p=0.311$) and dyslipidemia was significantly associated with LP (60% vs. 40%, $p=0.007$). LP was associated with higher mean of serum triglyceride (1.21 ± 0.34 vs. 1.08 ± 0.32 mmol/L $p=0.003$), LDL-C (3.47 ± 0.89 vs. 3.12 ± 0.77 mmol/L $p=0.007$), and T-

cholesterol (5.32 ± 0.88 vs. 4.92 ± 0.86 $p=0.002$). LP patients with MetS were older ($p<0.001$) and less likely to have Wickham striae ($p=0.028$). Females LP patients were older ($p=0.047$), obese ($p=0.043$) and had higher mean HDL-C (1.34 ± 0.31 vs. 1.21 ± 0.17 mmol/L $p=0.015$) and T-cholesterol/HDL-C ratio (4.46 ± 0.84 vs. 4.08 ± 0.73 mmol/L $p=0.025$). Hypertrophic LP was more frequent in dyslipidemia (63.0% vs. 27.8% $p=0.002$). Correlates of dyslipidemia include anthropometry, fasting plasma glucose, SBP, and DBP but not duration of the LP. Family history of diabetes mellitus was an independent predictor of MetS in LP patients (OR: 4.4, CI: 1.0-19.1, $p=0.047$).

CONCLUSION: LP is insignificantly associated with MetS among Nigerians and a significant association exist between LP and dyslipidemia. Family history of diabetes mellitus is predictive of MetS in LP patients. Lichen planus patients should be routinely screened for MetS and its components.

Key Words: Lichen Planus, Metabolic Syndrome, Dyslipidemia

Scabies, Is There Really A Re-emergence?

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INTRODUCTION: Scabies infestation is a public health concern as there appears to be a transition from it being endemic to it becoming an epidemic. Re-emergence of scabies has been documented to occur in certain populations because of their living conditions. The aim of the study was to determine the recent frequency proportion of scabies, compared with the past and to describe the pattern of scabies at the Dermatology and Venereology Clinic of Obafemi Awolowo University Teaching Hospitals' Complex (OAUTHC), Ile-Ife.

METHODS: This was a retrospective descriptive study that involved all dermatology outpatients that presented newly to the dermatologist at OAUTHC, Ile-Ife, Osun State from January to December 2017. Results were compared with that of a similar study

done in the same centre 5 years ago.

RESULTS: A total of 457 patients were studied. Scabies accounted for 84.5% of parasitic infestation as compared to 8.6% in the past. Scabies was the second most common dermatoses with a frequency proportion of 9.8% as compared to 0.5% 5 years ago. Ages 21 to 30 years were mostly affected. Male to female ratio was 1.5 to 1. Cases were present through the year but peaked during the raining season.

CONCLUSION: An increased awareness on the resurgence of scabies is necessary for the dermatologist to prevent an epidemic. The conditions leading to its re-emergence needs to be identified to create appropriate interventions.

Clinical Diagnoses of Superficial Mycoses: Are Clinicians Over-Diagnosing Dermatophytoses?

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BACKGROUND: Dermatophytoses or superficial fungal infections are a common reason patients present at the dermatology clinic. Fungi are ubiquitous and the humid environment of the tropics allows for perpetuating disease. Patients attempt treatment with over the counter medicaments and alternative medicines with varying results. Most clinicians make a diagnosis and begin empirical treatment often without laboratory confirmation. This may be responsible for resistant organisms which may develop tolerance to available antifungals.

AIM: To compare clinical diagnoses of dermatophytoses with laboratory results.

METHODS: a retrospective review of the clinic records over six months (July 2017- Dec 2017). Case notes with clinical diagnosis of *Tinea capitis*, *corporis*, *faciei*, *incognito*, *interdigitales*, *intertrigo*, *manum*, *pedis*, *unguim*/*Onychomycoses* and *Pityriasis versicolor* were retrieved, details on demographics, duration of

disease, treatment before presentation, laboratory request and result, treatment given and outcome at follow up was entered onto Microsoft Excel spread sheet and analyzed with SPSS 22.0

RESULT: One hundred and twenty of 1038 (11.6%) patients were clinically diagnosed with superficial mycoses. The mean age was 30.6 ± 20.0 years; range of 2 – 82 years and the most common diagnosis (27; 22.5%) was *Tinea incognito*. Investigations were not requested in 97 (80.8%) of cases, results of KOH microscopy and culture was negative in 10 (1.2%) cases, only 1 case isolated *Candida spp.* At follow up visits, 30(25%) patients improved, 3 patients did not improve and there was no documentation of outcome in 85(70.8%) cases.

CONCLUSION: Several factors contribute to this gap in diagnostic outcome and these need to be addressed. A clinical diagnosis of superficial mycoses requires laboratory confirmation to improve management of the disease.

Madura Foot, A Neglected Tropical Disease: Case Report and Literature Review

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INTRODUCTION: Mycetoma, a neglected tropical disease, is a chronic progressive granulomatous disease of the subcutaneous tissue characterized by a triad of tumescence, multiple sinus tracts and subcutaneous nodules. It is caused by fungi (Eumycetoma) and aerobic bacteria (Actinomycetoma).

We present a fifty-one year old farmer with swollen right foot for seven years alongside purulent discharge and ulcerations. He defaulted treatment after initial improvement of symptoms with worsened symptomatology on return. Skin biopsy showed evidence of maduromycosis. X-ray of the foot done revealed osteolytic changes of the

metatarsal and tarsals of the right foot. Wound swab for microscopy, culture and sensitivity grew no organism. Erythrocyte sedimentation rate was 128mm /hr. He had a normal white cell count. He was placed itraconazole, cotrimoxazole with wound dressing with some improvement while being co-managed with the surgeons.

CONCLUSION: Mycetoma is still a poorly reported tropical disease with need for more concise global and regional collaboration at eradication. There is a need for more awareness on the need for early presentation and sustained management in this part of the world.

Hair Removal with Long Pulsed ND: Yag 1064 Laser; Observations in 71 Nigerian Patients with Type V and Vi Skin

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INTRODUCTION: Laser removal of unwanted hair is a frequently performed procedure especially in developed economies. The long-pulsed 1064 Nd YAG Laser has proven to be of most benefit in dark skin with high efficacy and high safety profile.

Herein we present data concerning the laser parameters, safety and side effects of 71 clients seen at a private laser clinic in Abuja.

METHODS: Case notes of all clients who had laser hair removal at PrimaDerma Lounge, Abuja, Nigeria between the period of January 2015 to December 2016 were retrieved. A semi quantified questionnaire was used to retrieve information from case notes. Details of biodata, history of symptoms, facial or body area affected, laser parameters used, side effects observed and efficacy of hair removal were taken. Information was analysed using SPSS 15.

Hair removal for all clients was done using long pulsed Nd YAG 1064 (Quanta system light B. Italy). Skin cooling was achieved using forced chilled air (Zimmer). All clients had topical anaesthetic applied 1 hour before the procedure. Their eyes were protected using metal goggles.

Results were represented graphically with tables and charts.

RESULTS: 71 clients had laser hair removal, 63 females (89%) and 8 males (11%).

32% of the laser hair removal clients completed 6 sessions or more of therapy.

Laser parameters used were pulse duration of 20ms, frequency of 1.5Hz and fluence between 16 to 22J/m and spotsize of 12mm.

Blistering, hypopigmentation and hyperpigmentation were the most commonly encountered side effects of laser therapy. These were transient and subsided after laser parameters were altered.

DISCUSSION: There is paucity of data concerning laser hair removal in darker skin types.

The term laser hair removal is widely used but this should be understood to mean permanent hair reduction. Hair removal using laser is achieved by the diffusion of heat from the chromophore in to the follicular stem cells in the bulge region and dermal papilla as proposed by the extended theory of photothermolysis.

The Nd YAG 1064 has proven to be of most benefit in dark skin types. The longer wavelength penetrate deeper in the more deeply placed hair follicles of darker skin.

Well-chosen laser parameters lead to less side effects.

Telemedicine Model for Dermatology Care: How Can We Be of Help?

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Teledermatology is the application of telecommunication and information technology to the practice of dermatology.

Dermatology is the best clinical specialty that benefits from this technology because of its inherently visual nature in both diagnosis and follow up which makes it easily applicable to virtual medicine. Tele consultations reduce time and increase the chances of access to one or more consultants.

The various models of teledermatology, areas of applications, barriers and its limitations as well as future directions are discussed in this presentation.

Nail Psoriasis in Nigerians

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BACKGROUND: Psoriasis is an inflammatory skin disorder that commonly affects the nails as well. Studies on psoriasis in our environment are very few and data on nail abnormalities in our environment are lacking.

OBJECTIVES: (1) To evaluate the frequency of nail involvement and various nail changes in patients with psoriasis (2) to identify any existing association between some clinical parameters and nail involvement.

MATERIAL AND METHODS: A cross-sectional study of patients diagnosed with psoriasis at the dermatology unit of University College Hospital, Ibadan, Nigeria between January 2015 and October 2016. Diagnoses was clinical and supported by histopathologic confirmation. After obtaining sociodemographic data, each patient had baseline skin examination with special attention paid to fingernail changes. Severity of nail involvement was calculated using Nail Psoriasis Severity Index Score.

Findings were documented analyzed and results compared with clinical parameters including quality of life scores.

RESULTS: Sixty-three patients were recruited into the study with a mean age of 39.84 ± 20.97 years and a male to female ratio of 0.9: 1. Psoriasis vulgaris was the commonest form of presentation in the study and nail changes were present in 51 patients (81.0%) with psoriasis. The most common nail abnormalities observed were pitting followed by onycholysis and nail discoloration. Nail involvement was significantly more frequent in patients with more cutaneous involvement.

CONCLUSIONS: Involvement of the nail is quite common in psoriasis in our environment and at times it may be the initial manifestation. Pitting, onycholysis and discoloration with a brownish to yellowish brown hue are the commonest nail abnormalities in patients with psoriasis in this environment. Nail abnormalities was associated more with more severe cutaneous disease.

Patient Empowerment, A Healing Therapy

Ogo Maduewesi

Founder/CEO Vitiligo Support and Awareness Foundation (VITSAF)

Keyword: Patient empowerment, healing therapy, informed decisions.

Patient Empowerment has emerged as a new paradigm that is helping improve medical outcomes while lowering costs and improving patient care and support in Western World. This concept seems promising in management of chronic conditions. Being a patient leader, discussions, listening and sharing experiences has been instrumental in achieving some level of success in the management of some skin conditions.

On this presentation, please let's look at the following questions:

- To what extent can you help us with your services without empowering us with open information about our health to take informed decisions that will help our healing process?
- To what extent can keeping information away from us or regarding our questions as unimportant help us from running to quacks, open market, churches etc where we often get the yearning attention?
- Do you know that Self-management is a key aspect of patient empowerment?
- Do you know that your smiles, attention, friendly discussions goes a long way?

The Many Faces of Lupus: A Case Series

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INTRODUCTION: Systemic Lupus Erythematosus (SLE) has been described as “protean”. It is an inflammatory, multisystemic autoimmune disease of unknown etiology with varying clinical and laboratory manifestations and a variable presentation, course and prognosis. It is typically defined by a triad of fever, joint pain and rash in a woman of child-bearing age. Author aims to describe the varying presentations of 5 SLE patients seen at a new rheumatology clinic in a Nigerian tertiary hospital.

METHODS: Records of patients with diagnosis of SLE within the first 8 months were pooled and summarised.

Patient 1: 26yr old female with features suggestive of, and managed for autoimmune haemolytic anaemia, who later developed inflammatory polyarthritis and body rashes. **Patient 2:** 48yr old female with generalised vasculitic rashes and ulcers,

fatigue, weight loss, fever; and subsequently, inflammatory polyarthritis. **Patient 3:** 27yr old female with ascending quadriparesis and sphincteric incontinence, past history of pregnancy-associated rashes, recurrent inflammatory joint pain and oropharyngeal ulcers. **Patient 4:** 23yr old female with recurrent right upper quadrant pain, jaundice and thrombocytopaenia, and later poly-arthralgia. **Patient 5:** 22yr old male who presented with 3 months history of recurrent cough and hemoptysis, with pleuritic chest pain, fever and weight loss.

RESULTS: All eventually met the SLICC criteria for lupus.

CONCLUSION: Presentations of SLE patients may not necessarily follow the “classical triad”. A full knowledge of its “many faces” is therefore paramount, to avoid delay in diagnosis.

Shaving Practices Among Adult Participants in Ibadan, Nigeria

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INTRODUCTION: Shaving refers to the removal of hair using bladed implements or creams. There appears to be an increase in shaving body hair excluding facial hair as suggested in the literature. Reasons for shaving includes reduction in body odour, sweat reduction, cleanliness, cultural practices, sexuality etc. The afro-caribbean hair is coarse and curly. This predisposes individuals to side-effects of shaving.

This study aims at identifying areas shaved and types of shaving implements used

OBJECTIVES:

- (1) Identifying body parts shaved
- (2) Identifying shaving implements used
- (3) Identifying side-effects of shaving

METHODOLOGY: A community survey on adult participants selected randomly in Ibadan North LGA May 2018. Participants were requested to fill a pretested questionnaire after obtaining their consent. The questionnaire contained socio-

demographic data; history regarding shaving practices and methods, beliefs, body sites shaved and reported side effects. Data was collected and analyzed using SPSS software version.

RESULTS: 120 people participated in the study with bimodal peak age group of 25-29 and 30-34 years. The M: F ratio was 0.88:1 (males=56). Areas shaved include; face, armpit and Pubic region. Most frequently used shaving implements are the straight razors (shaving stick with single blades, shaving stick with multiple blades) and clippers. Commonly reported side effects were irritation and itching, shave-bumps and cuts/laceration.

CONCLUSION: Shaving of body parts such as face, armpits e.t.c is very common in our environment for various reasons including appearance, acceptability and cultural beliefs. Frequently used shaving instrument are the straight razors and clippers. Frequently reported side-effects are irritation and itching, shaving bumps, cuts and laceration.

The Histopathology of Psoriasis in Nigerian Patients

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BACKGROUND: Recent observations have indicated that psoriasis is not as uncommon in our population as previously thought. Previous experience of its rarity was faced with paucity of studies on the disorder including description of its light microscopic features in this environment.

OBJECTIVES: To evaluate the frequency of occurrence of the various histopathologic features of psoriasis in patients from this environment and to compare it with reports from other population so as to identify if any uniqueness exist.

METHODS: A cross-sectional study of patients diagnosed with psoriasis at the University College Hospital, Ibadan between January 2015 and October 2016. After baseline sociodemographic data, each patient had baseline examination and was offered a skin biopsy after obtaining a consent. The biopsy specimen was sent for routine histologic processing and the slide was examined under a light microscope for various histopathologic features using a pretested proforma with the frequencies reported in percentages.

RESULTS: Sixty-three patients were seen but only 48 (76.2%) consented to having a biopsy. The mean age of the patients studied was 39.84 ± 20.97 years with a male to female ratio of 0.9: 1. Psoriasis vulgaris was the commonest form of presentation in the study. The most consistent epidermal changes in decreasing order of frequency were acanthosis, hypogranulosis, hyperkeratosis followed by elongation of rete ridges while those of the dermis were dermal infiltration by inflammatory cells, and dilatation of vessels. Munro's microabscess was found in less than half of the patients biopsied. Some of the patients were found to have atypical changes.

CONCLUSIONS: Histopathological features of psoriasis in patients from West Africa is similar to what has been previously established universally but typical features such as Munro's micro abscesses and Kogoj's spongiform pustules are less frequently seen than expected. Atypical changes such as dermal melanophages and periadnexal infiltration by inflammatory cells may also be seen.

Psoriasis And Mycosis Fungoides in a Patient With Background Pemphigus Foliaceus; A Mere Coincidence?

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INTRODUCTION: Pemphigus foliaceus is an autoimmune blistering condition due to auto-antibodies to desmoglein 1 while mycosis fungoides is a type of cutaneous T cell lymphoma. Psoriasis is a chronic papulosquamous disorder which can involve the skin, scalp, nails, mucous membranes and joints. Several cases of mycosis fungoides initially diagnosed as psoriasis with occasional co-existence of the two conditions in the same patient exists in the literature. This case report highlights the occurrence of psoriasis and mycosis fungoides in a patient with recently managed pemphigus foliaceus.

CASE REPORT: A 36 year old lady presented with a three year history of recurrent generalised bullous eruptions sparing the oral mucosa. Involvement of the intertriginous areas was also noted. Fasting blood sugar was noted to be in the diabetic range, however full blood count, viral markers, renal function were normal. Histology revealed intraepidermal bullae in

the granular layer with acantholytic keratinocytes and moderate eosinophilic spongiosis. A diagnosis of pemphigus foliaceus was made and patient was commenced on treatment with azathioprine. She went into remission but developed new erythematous well demarcated slightly scaly pruritic plaques eighteen months after initial diagnosis of pemphigus foliaceus was made. Histology showed typical features of both psoriasis and mycosis fungoides. Immunohistochemistry revealed diffuse CD3 and CD4 positivity and scattered CD8 positive T reactive cells. She has commenced chemotherapy and is being co-managed with haematology and oncology unit.

CONCLUSION: Several cases of concurrent psoriasis with mycosis fungoides have been reported. This patient had a background history of pemphigus foliaceus. The occurrence of the three conditions in the same patient may be as a result of immune dysregulation or simply mere coincidence.

Drug Induced Pemphigus: Case Report on Course, Severity and Outcome in South Western Nigerian Tertiary Facility

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INTRODUCTION: Drug induced Pemphigus is an established variant of pemphigus. It should be suspected in every new patient with Pemphigus.

CASE REPORT: Seventy-two year old retired nurse with recurrent blistering rashes on the skin of 13 months prior to presentation. He developed itchy easily ruptured blisters in the right leg which progression all over the body sparing the palm, sole, eyes and oral mucosa. No difficulty with swallowing, no mouth ulcers. Preceded by ingestion of Penicillin (Ampiclox). History of allergy to peanut with generalized. No family history of blistering eruptions.

Skin examination revealed widespread polycyclic erythematous scaly and crusted plaques on the trunk, extremities and the face, background post inflammatory hyperpigmentation. Fresh superficial erosions on the dorsum of the hand, the face and the nose. No oral lesion.

Investigations showed leukocytosis (15,000/ cubic mm) with relative neutrophilia. ANA was negative.

Skin biopsy done revealed cleft in corneal layer, acanthosis, elongation of the rete ridges, parakeratosis and hypogranulosis with supra-papillary thinning and infiltration by corneal layer by acute polymorphonuclear inflammatory cells. The dermis shows a few dilated vascular channels, infiltrates of chronic inflammatory cells and melanin incontinence. No evidence of malignancy.

He was managed on Mycophenolate mofetil, azathioprine, prednisolone, Vitamin D, Calcium carbonate, Loratidine, antihypertensives and SPF-15. Prednisolone is gradually being tailed off.

No new lesions following treatment at recent visit with a happy patient and happy family.

DISCUSSION: Drug induced pemphigus is an established variant of pemphigus. It should be suspected in every new patient with Pemphigus. Most common variant of pemphigus associated with drug exposure are Pemphigus Foliaceus and Pemphigus Vulgaris.

The pathogenesis involves either direct acantholysis or by antibody mediated mechanism. Interference with critical enzymes (keratinocyte transglutaminase) that maintain epidermal cohesion by drugs occurs in direct acantholytic hypothesis.

Histological features include superficial epidermal acantholysis, subcorneal cleft and suprabasal acantholysis.

Diagnostic insights are through in vitro interferon-gamma (IFN-gamma) release from lymphocytes test and 32-2B immunolabeling.

Withdrawal of offending drug is a very important treatment. Others are supportive management, corticosteroid, immunosuppressive therapy etc..

CONCLUSION: Drug induced Pemphigus (pemphigus Foliaceus and pemphigus vulgaris) is well established variant of pemphigus. It should be suspected in every new patient with Pemphigus. Withdrawal of offending drug is vital in the treatment.

Using The Ultra-Violet Detection Beads to Assess the Effectiveness of Commonly Used Concentrations of Sunscreen Lotions in Nigeria

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INTRODUCTION: Human skin is a good detector of ultra-violet (UV) radiation. Prolong exposure to sun light can cause wrinkling and even cancer of the skin especially among at risk individuals like albinos. Therefore use of sun screen lotion is of great importance in the sunny weather of Northern Nigeria. Northern Nigeria is a home to over 6 million albinos who are highly at risk of skin cancer due to damaging effect of UV radiation wave length, the UV radiation can break chemical bond in the skin during exposure causing damage to the skin. Using UV detecting beads is a safe way of detecting UV wave lengths and how well sun screen lotions works.

OBJECTIVES: To determine the SPF of sun screen that will effectively block the UV waves in our environment.

METHODS: UV detecting beads were obtained and placed in door for 3mins and the observed finding was recorded. The beads were then taken outside but not under the sun, and the colour change was observed and recorded. This procedure was repeated in direct sun light and the colour change observed after 3minutes and recorded. The beads were then returned in-door until it turned white in colour. Thin coat of sun screen lotions with different sun protective power were

applied on the petri-dishes containing the beads and the procedure was repeated in-doors, outside not under the sun and under direct sun light respectively. The colour changes observed were recorded and graded 1-5, with 1 given to the one with least colour change and 5 as the one with most colour change.

RESULT: The petri-dish coated with sun screen with SPF 50 was the one with least colour change followed by petri-dish coated with sunscreen lotion SPF 30 and the differences observed between petri-dishes with sun screen lotion SPF 50 and SPF30 in terms of colour change was not widely different. Very little or no difference was observed between petri-dishes coated with sun screen SPF less than 30 and the one without sun screen.

CONCLUSION: Any sun screen with SPF less than 30 may not effectively protect individuals from the damaging effect of UV radiations in our environment. Sun screen lotion with SPF 50 is more effective than sunscreen lotion with SPF 30 in protecting against UV radiation damage from the sun in our environment.

Key words : Sun screen lotion, Northern Nigeria, UV protection.

Lupus Vulgaris Coexisting with Lichen Scrofulosorum - A Rare Association

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BACKGROUND: Lupus vulgaris and lichen scrofulosorum are forms of cutaneous tuberculosis, the latter being an uncommon tuberculid.

CLINICAL CASE: A 12 year old boy presented with two years history of slowly progressive facial plaque and multiple skin coloured papules on the neck. Tuberculin skin test was positive with a reading of > 20mm. Histopathology revealed ulcerated areas with impetiginisation and keratopurulent debris. The entire skin showed pseudoepitheliomatous hyperplasia with numerous granulomas in the superficial dermis made up of Langerhans type multinucleated macrophages. Lesions responded to antituberculous therapy with residual facial scar.

CONCLUSION: Lupus vulgaris and lichen scrofulosorum are two forms of cutaneous tuberculosis which rarely occurs together. This case is being presented to highlight the occurrence of this rare presentation and the need to institute antituberculous therapy to prevent scarring.

Congenital Ichthyosiform Erythroderma Affecting 19 Members in an Extended Family Setting in Sokoto; A Possible Outcome of Consanguineous Marriage: A Case Report

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BACKGROUND: Congenital ichthyosiform erythroderma (CIE), is an autosomal recessive inherited skin disorder of the ichthyosis family. That usually phenotypically presents at birth. CIE is a rare disease worldwide, with an incidence that ranges from 1:200,000 - 1:300,000 births. Higher incidence of CIE has been reported from Norway. The disease has no cure and requires lifelong treatment, associated with psychological, social and financial burden to both individuals and families. Some of the genes incriminated in the aetiology of CIE include: transglutaminase gene, ALOX12B and ALOXE3 genes

AIM: To stimulate discussion on effect of consanguineous marriages in North-western Nigeria

CASE REPORT: We report a case of eleven males and eight females of an extended family members who presented with features of collodian membrane, diffuse erythema and severe xerosis of the skin at birth, fine white scaling of the face and body and palmoplantar hyperkeratosis. Three of the affected

family members have large plate-like ichthyosis on the lower limbs.

There is a high rate of consanguineous marriages among the family members. All the parents of the affected family members are either first or second cousins and are phenotypically normal.

Skin biopsy of one of the patients was taken for histology.

Supportive care: the patients improved on salicylic acid ointment, urea cream and oral retinoid.

CONCLUSION: Congenital ichthyosiform erythroderma is an uncommon form of ichthyosis with autosomal recessive mode of inheritance. Consanguineous marriages help in the propagation of defective genes leading to high incidence of autosomal recessive disorders in such families.

KEYWORDS: Congenital ichthyosiform erythroderma, familial clustering, rare skin disease Consanguineous marriage

Safety of Laser Hair Reduction Treatment in Nigerian Patients

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BACKGROUND/INTRODUCTION: Laser permanent hair reduction is a new practice in Nigeria. Its efficacy, safety or otherwise is not known. Also, the effective fluence, safe pulse width is not known.

METHODS: This was a retrospective chart review over a one year period; January to December 2017. Case records of all the patients who came to the clinic for laser hair reduction were retrieved and relevant information was extracted. The Nd-Yag 1064 long pulse was used in this treatment. Patients were treated every 4 to 6 weeks. Simple means and frequencies are presented.

RESULTS: Fifty one patients were treated and 133 sessions were done. Of the 51 patients 2 were male. The age range of the patients was 17 to 60 years. The indication for hair reduction was cosmetic in 94%. Effective fluence and pulse width ranged from 13-20 and 14-21 respectively. All the patients reported a marked reduction in hair growth with having to shave 0-1 time between sessions. Two patients had superficial burns despite using a low fluence and pulse width.

CONCLUSION Laser treatment for hair reduction is safe and effective in Nigerian patients.

Key words: Laser, hair reduction, fluence, pulse width

Body Dysmorphic Disorder Among Patients Attending Dermatology Clinic in Nigeria: Sociodemographic and Clinical Correlates

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BACKGROUND: Body dysmorphic disorder (BDD) is relatively common Psychiatric disorder in the settings of Dermatology, Cosmetic and Plastic Surgery but underdiagnosed and underreported in Africa.

OBJECTIVE: To evaluate the prevalence of body dysmorphic disorder (BDD), accompany symptoms of anxiety/ depression and determine their sociodemographic and clinical correlates.

METHODS: A systematic random sampling design was made to recruit 114 patients with skin diseases. Sociodemographic and clinical data were obtained. The BDD-YBOCS and HADS were administered, and data analysis was done using SPSS 20.

RESULTS: Mean age of participants was 37.70 ± 17.47 , and 67/114 (58.8%) were females. Prevalence of BDD and anxiety/depression was

35.96% and was 30.5%, and facial diseases had the highest prevalence of BDD and anxiety/depression (13.2%) respectively. Factors associated with significantly higher mean BDD include age < 50 years (10.77 ± 8.91 vs 6.96 ± 6.27 , $p=0.039$), and HADS score (12.15 ± 8.37 vs 5.51 ± 4.72), Education status below high school was associated with higher mean HADS score (10.63 ± 9.21 vs 7.17 ± 6.17 , $p=0.031$). In a binary logistic regression model, the presence of anxiety and depression symptoms was predictive of BDD (OR=10.0, CI: 4.1-28.2, $p<0.001$).

CONCLUSION: High prevalence of BDD in this study is high calls for Dermatologists to routinely assess patients for feeling about their appearance and appropriately refer them to mental health physician.

Keywords: Body dysmorphic disorder, Anxiety, Depression

Mycosis Fungoides: A Case Report in a 35 Year Old Lady in U.B.T.H, Benin City, Edo State, South South Nigeria.

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BACKGROUND / INTRODUCTION: Mycosis fungoides (MF), also known as granuloma fungoides or Alibert Bazin syndrome. It's the commonest form of cutaneous T-cell lymphoma.

The name of MF is misleading. It means mushroom like fungal disease but the disease is not a fungal disease, it's a type of non-Hodgkin's lymphoma.

Here is a case of a 35 year old lady who hails from Ozo Delta State, South South region of Nigeria.

She was initially managed for urticaria Vasculitis R/O Mastocytosis but further investigations was in keeping

with MF in which she was managed with Topical glucocorticoids and chemotherapy, she has had second course of chemotherapy awaiting a third course

CONCLUSION: MF is a low grade cutaneous lymphoma which is poorly diagnosed in most cases. It becomes highly aggressive in later stages. Prognosis is good when diagnosis is made in the early phase and interventions are put in place. High index of suspicion is therefore very essential.

Keywords: superficial mycoses, fungi, dermatophytoses

Clinical Spectrum of Adverse Cutaneous Drug Reactions in A Tertiary Health Facility, South-West Nigeria.

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BACKGROUND: Cutaneous adverse drug reactions are one of the commonest adverse reactions caused by drugs, however many cases go unreported. It is defined as any undesirable change in the structure and/or function of the skin, its appendages, and/or mucous membranes.

Although most of these reactions are mild, presenting as maculo-papular rashes, fixed drug eruptions, other severe form like toxic epidermal necrolysis may be associated with high morbidity and mortality. Antibiotics and anticonvulsants are among the drugs most commonly associated with cutaneous adverse drug reactions.

AIM: The aim was to study the various clinical patterns and identify the implicating drugs of cutaneous adverse drug reactions (CADRs).

METHOD: This is a retrospective cross-sectional study using the clinical records of all patients who presented with adverse cutaneous drug reaction over a period of three years. Data was analyzed with SPSS version 20.0.

RESULTS: A total of 30 patients were seen during the study period comprising of 17 males (56.7%) and 13 females (43.3%). The mean age of patients with CADRs was 34.4 years. The most common CADR was fixed drug eruption in 73.3% of patients followed by erythroderma in 13.3%. The most common classes of drugs implicated were antibiotics in 80% of patients of which 60% were sulphonamides.

CONCLUSION: Recognition of the various clinical patterns and causative agents can aid in both diagnosis and withdrawal of the implicating agent thereby improving outcome.

Neglected Tropical Diseases in A Dermatology Clinic in South- South Nigeria.

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BACKGROUND: Neglected tropical diseases (NTD's) are a diverse group of communicable diseases that are present in tropical and subtropical countries. They usually occur in developing countries and are associated with poverty, inadequate sanitation and living in close contact with infectious vectors and domestic animals and livestock. WHO has set targets for elimination and eradication of neglected tropical diseases, as this would improve the conditions of living in affected communities. A number of neglected tropical diseases have skin manifestations, so therefore the dermatologist has a keen role to play in elimination and eradication. This study aims to identify the types and prevalence of these diseases with associated diagnostic and management challenges.

MATERIALS AND METHODS: This is a descriptive study in which the records of patients

presenting with neglected tropical diseases in the dermatology clinic from January 2015 to April 2018 were obtained and analysed.

RESULTS: One thousand five hundred and eighteen (1518) records of patients who visited the dermatology clinic during the period were assessed. 115 cases of NTDs were identified, which is 7.57% of the total population seen. There were more males (60.87%), with vast majority of cases being in their third decade. Five NTDs were identified, with scabies been the most prevalent (80.87%) followed by Hansen's disease(15.65%). There appears to be an increase in the occurrence of these diseases.

CONCLUSION: Neglected tropical diseases are common in the dermatology clinic, with a rise in trend for Scabies and Hansen's disease.

Elephantiasis Nostras Verrucosa: A Closer Look at that Penoscrotal Warty Lesion.

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ABSTRACT: Elephantiasis nostras verrucosa (ENV) is an uncommon cutaneous complication of chronic lymphatic obstruction, which morphologically appears as clusters of verrucous papules and nodules in a cobblestone-like pattern. It represents the late stage of chronic non-filarial lymphoedema, resulting in the recurrent and progressive swelling of the affected part, with associated impairment in both physical and psychological health-related quality of life.

Its rough papillomatous appearance, and the presence of more common conditions with similar morphology, increases the tendency for misdiagnosis, resulting in delay in management and prolongation of the state, extent and degree of morbidity.

I hereby describe the case of a young man with progressively worsening peno-scrotal ENV, which was thought to be condyloma acuminata both clinically and histologically, resulting in a ten year wait until a definite intervention. The rarity of the

condition and the relative dearth of case reports imply that the diagnosis of this disfiguring condition will elude many specialists.

Following an extensive literature search and to the best of my knowledge, no other case of elephantiasis nostras verrucosa has been reported in Africa, despite the preponderance of filarial lymphoedema in the region. This case is reported to create awareness among medical practitioners, with the hope that it will foster early diagnosis and institution of the requisite management.

KEY MESSAGES: Elephantiasis nostras verrucosa is a rare distressing cutaneous manifestation of chronic lymphatic blockage. Penoscrotal involvement is a rarer presentation which severely impacts quality of life in more ways than the disfiguring physical appearance. Globally, there are only about four published reports of penoscrotal ENV in the literature, but none from the African continent. This probably presents the first of such reports.

Skin Surface PH Levels in African Skin

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BACKGROUND: The knowledge of skin biophysical characteristics like skin surface pH is important for skin health maintenance and the effective management of skin diseases. Skin biophysical parameters are known to have racial variations and there are very few studies that document the skin pH of healthy black Africans living in Africa.

OBJECTIVE: The aim of this study was to determine the average pH of the skin of healthy Nigerians and any variations with gender, age and body location.

METHODS: 1075 healthy volunteers with no skin pathology living in Lagos, Nigeria were recruited over 9 months. The Skin pH meter 905 *manufactured by Courage & Khazakha Electronics GmbH*© was used to measure skin surface pH at two different body locations – the forehead and left volar arm.

RESULTS: 1075 healthy Nigerian volunteers (611 females and 464 males; age range 1 - 85 years) had their skin surface pH analysed. The mean skin pH was 4.87 ± 0.48 . There were statistically significant differences in the skin pH of the different age groups, sexes and body locations. The values obtained were compared with other studies on skin surface pH in literature.

CONCLUSION: The average skin surface pH of healthy Nigerians is lower than what is documented in literature. Like other studies however, there are variations with gender, age and body location. Results obtained from this study will serve as a reference for other studies on skin pH in diseased skin conditions in Nigerians and Africans. They will also facilitate the development of racially appropriate skin care and treatment formulations.

Key Words – Biophysical Parameters, Skin pH, Ethnic Skin, pH of African Skin, Normal Black Skin

Topical Corticosteroid use and Misuse: The Trend of Corticosteroid Addiction Amongst Dermatology Out-Patients In Nigeria (A Preliminary Study)

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Corticosteroids are amongst the most commonly prescribed topical agents in dermatology practice. However, owing to a wide range of steroid responsive dermatoses, low cost and unregulated availability in the country, corticosteroids have also become one of the most commonly abused topical agents encountered in dermatology practice.

This study was conducted to determine the pattern of un-prescribed steroid use among dermatology out-patients and determine the burden of complications of chronic steroid use amongst them. An interviewer-administered questionnaire was used to obtain relevant clinical and demographic information from 45 consenting patients presenting newly to the dermatology clinic over a period of 6 weeks.

The median age of the participants was 24 years, with a male:female ratio of 1:1. Twenty-four (53.3%) of the subjects had used topical corticosteroids prior to presentation, of whom 18(75%) had applied highly potent topical corticosteroids for variable

periods that ranged from 1 week to 15 years. Fifteen (62.5%) had non-infectious dermatosis such as acne and eczema while 9(37.5%) had infectious dermatoses of which fungal infections 7(29.2%) was the commonest. Only 2((8.3%) experienced clinical improvement in lesions while 10(41.6%) experienced worsening of symptoms following corticosteroid use and/or discontinuation. Nineteen subjects (71.1%) had one or more side-effects of corticosteroids. Topical corticosteroid use was associated with delayed clinical presentation with the duration of skin lesions being two times longer in those that used corticosteroids compared with those that did not.

CONCLUSION: Self-medication with potent topical corticosteroids is a common practice amongst patients with skin disorders. It is associated with delayed presentation and a high prevalence of complications. There is a need for tighter regulation of topical steroid sales and public education on hazards of topical steroid abuse in this environment.

Hansen's Disease: A Wake-Up Call to a Re-emerging Tropical Disease

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INTRODUCTION: Leprosy is an infectious granulomatous disease caused by *Mycobacterium leprae*. *The clinical manifestations and disturbing social stigma are protean. The numerous complications of leprosy often result from lack of the proper attention leprosy deserves. We hereby report two of the ten cases of leprosy diagnosed at Obafemi Awolowo University Teaching Hospitals complex, Ile-Ife between 2016 and 2017.*

CASE REPORTS

Case 1: A 14-year old boy with 3years history of painless generalized nodules and right foot ulcer. The ulcer was preceded by numbness and patient also had recurrent epistaxis. His younger brother and late father had similar rashes.

Examination revealed auto-amputated left index finger, right foot ulcer, generalized nodules and

impaired light torch. A clinical diagnosis of lepromatous leprosy was made. They both received wound care and WHO multidrug therapy (MDT) with satisfactory response.

Case 2: A 24-year old female undergraduate who presented with 6months history of multiple erythematous plaques associated with sensory loss on upper and lower limbs. Leprosy was diagnosed clinically and confirmed histologically. MDT was instituted with resolution of the rashes.

CONCLUSION: Leprosy has somewhat been neglected despite increasing incidence. This debilitating disease is often misdiagnosed in inexperienced hands due to its diverse clinical presentations. It is important physicians have high index of suspicion for leprosy and intensify case finding and treatment to reduce the morbidity and mortality from this re-emerging disease.

Quality Of Life Impairment Among Dermatology Patients in a Tertiary Hospital

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BACKGROUND: Skin diseases are numerous and distressing. They are known to affect quality of life and despite the awareness of the impact of dermatoses on the quality of life of dermatology patients, there is paucity of data here in Lagos. The study is aimed at assessing the quality of life of new dermatology patients, identifying disease pattern and other factors associated with it; hence provided data for future research works.

METHOD: A Cross-Sectional study, conducted over 4 months, involving 287 new patients seen at the Dermatology clinic of Lagos State University Teaching Hospital, Ikeja. Quality of life was assessed using the Dermatology Life Questionnaire Index (DLQI) and diagnosis documented by a dermatologist. Statistical

analysis was done using SPSS IBM version 23.

RESULT: More than half (59.6%) of the new patients were young (40yrs) with a near equal male to female preponderance (1:1.2). There was a statistically significant impairment to quality of life in the young (P value=0.001) with a median DLQI (IQR) score of 10 (4.0, 16.5); embarrassment/self-consciousness being the most implicated parameter. Neurofibromatosis impaired QOL the most with a median DLQI score of 20.

CONCLUSION: Quality of life assessment is essential and enhances empathy from physicians towards patients. It identifies patients at higher risk of experiencing worse quality of life, necessitating an early and intense approach to their management.

Cutaneous Bacillary Angiomatosis in A HIV Infected Patient on Antiretroviral Therapy (ART)

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INTRODUCTION: Bacillary angiomatosis (BA) is a rare vasculoproliferative form of *Bartonella* infection that occurs primarily in immunocompromised patients, especially in those with advanced HIV/AIDS and CD4 count less than 100 cells/mm³.

OBJECTIVE: We are reporting a case of cutaneous bacillary angiomatosis in a HIV infected patient on antiretroviral therapy (ART) with good immunological response- CD4 count of 397 cells/mm³ and undetectable viremia. This is a rare and unusual presentation of BA.

CASE REPORT: We report a 43 years old Fulani widow who was diagnosed HIV positive 3 years prior to presentation and was immediately commenced on ART with good immunological response and virological suppression few months later. She presented with complaints of progressive painless growth on the right upper thigh of 4 months duration with subsequent ulceration and discharge of serosanguinous fluid. On skin examination she

has a single ulcerated dark nodule on the superior-medial aspect of the right thigh measuring 4cm by 3cm, friable, tender with some crust, has significant peripheral lymphadenopathy of the right inguinal group. A presumptive diagnosis of BA was made to rule out Kaposi's sarcoma. Skin biopsy tissue was sent for histological evaluation which confirm the diagnosis of BA. She was placed on oral erythromycin tablets for 12 weeks while she continue her ART, with complete resolution of symptoms.

CONCLUSION: Bacillary angiomatosis is a rare opportunistic infection commonly diagnosed in patients with advanced stage of HIV/AIDS. However, it can as well be diagnosed in immunocompetent individuals and also in HIV infected patients having good virological suppression and immunological response, though it is extremely rare and exceptional finding. Thus, there is a need for high index of clinical suspicion with early skin biopsy of suspicious lesions in such patients.

Sign of Leser Trelat in a Post Mastectomy Patient: A Case Report.

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INTRODUCTION: The sign of Leser-Trélat is defined as a frequently pigmented benign tumour composed of epidermal keratinocytes presenting with an abrupt appearance and rapid increase in the size and number of multiple seborrheic keratoses caused by neoplastic and non-neoplastic causes. It can occur both in the elderly and younger age groups and as paraneoplastic dermatoses before, during, and after treatment of malignancy. Gastric adenocarcinoma is the malignancy most frequently associated with sign of Leser-Trelat. Others are genetic predisposition, hematologic malignancy, infection, inflammatory disorders, drugs, pregnant and healthy individuals. Diagnosis entails clinical recognition, skin biopsy, dermoscopy and immunohistochemistry.

CASE REPORT: We present a 70-year-old postmenopausal woman who had left breast cancer eleven years ago with rapid increase in the number of dark raised skin rash on the back. History of similar fewer rashes on the face in her as well as in the father. No symptoms of visceral malignancy.

Examinations showed multiple hyperpigmented papules and verrucous plaques on the back with a stuck-on appearance extending from the clavicular to the lumbar region, some with change in colour around the skin folds. The diagnosis of sign of Leser-Trelat was made secondary to breast cancer.

CONCLUSION: A sudden eruption of numerous seborrheic keratoses should prompt a malignancy work-up in patients with risk factors and those who have not undergone age-appropriate cancer screening.

Self-Medication Amongst Dermatology Out-Patients

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Self-medication in its diverse forms is a common practice particularly in the outpatient setting. The motivation for self-medication is highly varied, however the visibility of skin diseases and unrestricted access to a wide range of topical agents as well as the accessibility of the skin contribute to this practice amongst dermatology patients. Self-medication is however cost-ineffective and harbours potential complications that may exceed the severity of the primary dermatologic condition.

This study assessed the pattern, financial cost and outcome of self-medication among dermatology patients. It was a cross-sectional study involving 62 patients presenting newly to the dermatology outpatient clinic. An interviewer administered questionnaire was used to obtain relevant demographic and clinical information from the participants.

RESULTS: The mean age of the subjects was 30.2 ± 18.2 years with female preponderance. Forty-five (72.6%) of the subjects had used one or more forms of self-medication prior to presentation of which

topical therapy (84.4%) was the most common. Triple-combination preparations (46.7%) were the single most commonly used topical agents while oral antibiotics 9(20%) were the commonest systemic agent. The cost of self-medication varied ranging from 180 to 31,000 naira per subject depending on the medication and duration of treatment. Only 3(6.7%) subjects experienced some improvement while 11(24.4%) experienced worsening of symptoms. Twenty-three (51.1%) experienced side-effects such as cutaneous hypersensitivity reactions, skin atrophy and hypopigmentation.

CONCLUSION: Self-medication is a highly prevalent practice amongst dermatology patients. Combination topical creams containing potent steroids and systemic antibiotics are the most commonly used agents. The financial cost as well as side effects of self-medication is high therefore, measures to increase public awareness of the hazards of self-medication and restrict access to non-over the counter medications are required to curb this epidemic among dermatology patients.

Erythema Annulare Centrifugum and Sick Cell Hemoglinopathy: A Cause For Introspection

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INTRODUCTION: Erythema annulare centrifugum is a self-limiting reactive process or antigenic “hypersensitivity” reaction. It is a figurate erythema with varied causes.

We present a 15year old known patient with sickle cell hemoglobinopathy with a progressively generalised annular rash of 4 months duration.

She initially noticed the itchy rash on the forehead with progression in size, number and location. There was no involvement of the mucosa. No history to suggest Koch's, Hansen's and drug reactions in the past. She was admitted ten months earlier with medications given to her (vancomycin, meropenem, cefuroxime, ciprofloxacin). Investigation showed

anemia(28%), relative lymphocytosis, poikilocytosis, erythroblast(1%), ESR was 3mm/hr (Westergreen method), normoglycemia, sputum AAFB was negative, skin slit showed absent acid fast bacilli. Skin biopsy showed unremarkable epidermis, perivascular and periadnexal cuff of lymphocytes and few histiocyte. Some pilosebaceous and adipose tissue seen.

1% hydrocortisone, Mupirocin ointment and loratidine given. Leisions healed with post inflammatory scars with some new leisions after 11weeks.

CONCLUSION: Erythema annulare centrifugum in this case is drug related.

Spectrum of Neglected Tropical Skin Diseases in a Nigerian Dermatology Practice.

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BACKGROUND: Neglected tropical diseases (NTDs) are a subset of chronic infectious diseases commonly found among the less privileged in developing countries. The World Health Organization (WHO) seeks to reduce and eventually eradicate these chronic disabling diseases which propagate poverty and under-development. The cutaneous manifestation of NTDs is the major cause of morbidity and stigmatization, thus the dermatologist has a key role to play in the aforementioned WHO goal. This study aims to identify NTDs in a dermatologic practice in Nigeria, and elucidate the major challenges to diagnosis and management.

MATERIALS AND METHODS: This is a retrospective study of all consecutive new patients presenting with NTDs, at a dermatology out-patient clinic.

RESULTS: Two thousand seven hundred and fifty (2750) patient records were assessed. Neglected tropical skin diseases accounted for 5.6% of the total

population. The vast majority were males (63.6%), with a male to female ratio of 1.8:1; and a mean age of 28.4 ± 17.4 . Six NTDs were identified, and the predominant type was scabies (66.9%), which was more common in males and students. Onchodermatitis was the second most common (14.3%) and showed a female preponderance.

CONCLUSION: Neglected tropical diseases are common in our urban tropical dermatology clinic. The most prevalent (scabies) is a highly contagious disease, whose diagnosis remains sub-optimal among healthcare practitioners. The latter trend, the absence of the treatment of choice, and the marked contagiousity of scabies will make the goal of its eradication unattainable, but rather lead to a public health epidemic.

Keywords: Skin neglected tropical diseases; Nigeria; scabies; cutaneous larva migrans; cutaneous leishmaniasis; filarial lymphoedema; leprosy; onchodermatitis.

Brands of Topical Corticosteroids (TC) Available in Pharmacies Across The Federal Capital Territory

Perpetua Ibekwe, Grace Okudo

BACKGROUND: TCs are the most commonly prescribed medication in dermatology practice. Over-the-counter availability of TC in Nigeria has encouraged its use for non-labeled indications. The ubiquitous prescription of TC has raised many concerns. Many TCs are compounded with other molecules. A typical example is the “triple combination”. Essentially, misuse of TC occurs at various levels, namely, marketing, prescription, sales and end-use by patients and laymen.

The aim of this study is to survey the brands of TC available in pharmacies across the Federal Capital Territory and to investigate the knowledge of the salesperson on potency, formulation and indication of use of TC.

METHODS: A cross-sectional survey was conducted in pharmacies/drug outlets across the major satellite towns within the six Area Councils of Federal Capital Territory, from July to October 2017, using a questionnaire. The questionnaire sought information on pharmacists/chemists knowledge on potency and formulation as well as the brands of TC available in the pharmacies/drug outlets.

RESULTS: Community pharmacies visited were 252, 69% of the pharmacists/chemists (n=174) consented to participate in the study. Knowledge of potency and formulations of TC, respectively, was obtained from 33.3% and 27.6% of the responders. A total of 454 TCs were on sale in 70.7% pharmacies/drug outlets visited. Over 73% were steroid combined with antifungal and antibiotics (triple combination); 5% and 4.6% were steroid combined with antibiotics or antifungal respectively; 15% were steroid alone. Only 6.6% were mild steroids and 98.6% were cream formulations. Most (87%) of the pharmacists/chemists stated that TC was dependent on doctor's prescription.

CONCLUSION: The choice of TC available for patients' treatment is majorly limited to “triple combination”. This is not in line with general clinical practice. There is need to commence active campaign against TC misuse.

RECOMMENDATION: There is need to commence active campaign of TC misuse in Nigeria.

Survey of Hair Disorders in A South Western Skin Clinic

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INTRODUCTION: The human hair constitutes an integral part of the human body with a uniquely complex, dynamic and continuous growth throughout life time bearing its distinct location, functions and molecular expressions. Various factors ranging from infectious, non-infectious, neoplastic and other causes are responsible for disorders of hair follicles.

METHODOLOGY: This is a retrospective study of all patients presenting with hair follicular disorders from November 2012 to February 2018 to the Dermatology clinic of LAUTECH Teaching Hospital, Ogbomoso, Oyo state. Patients records were looked into for demographics, presenting complains and diagnosis. Results analysed and result presented in tables.

RESULT: thirty-eight patients were seen, representing 6.42% of the total patients (592) seen. M:F ratio is 2.8:1 with age range between 1-53years. Mean age was 25.92(±11.74).

Infectious constituted 55.26% (21) while non-infectious causes was 44.74% (17). Infectious causes include fungal (31.58%), bacterial (23.68%), while non-infectious causes include acne keloidalis nuchae (21.05%), pseudofolliculitis barbae (13.16%), alopecia areata (7.89%), lichen planopilaris (2.63%).

CONCLUSION: Fungal Infection was the commonest cause of hair disorders in this study though autoimmune disorders formed the second commonest non-infectious cause. There is a need for preventive measures to stem the tide of infectious hair disorders.

Madura Foot: Case Report of A Neglected Tropical Disease

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Keywords: Madura foot, eumycetoma, sinus, microbial grain

INTRODUCTION: Madura foot is a chronic, granulomatous and progressive infection of the skin and subcutaneous tissue commonly affecting the foot. It is characterized by painless swelling, draining sinus tracts and discharge of microbial grains.

CASE PRESENTATION: A 35 year old man, a photographer, presented to the LUTH dermatology clinic with a 6 year history of progressive swelling of the left foot. There was no known history of trauma to the foot prior to onset.

Examination findings revealed non-tender left foot oedema, with multiple ulcerated infiltrated nodules, and sinuses discharging foul smelling purulent discharge with black grains on the dorsum and plantar surfaces of the foot.

Skin biopsy histology showed neutrophilic abscesses

containing grains made up of circumscribed masses of hyphae with thick branching intertwined filaments. Grocott and PAS stains confirmed the presence of fungal hyphae. The overall features was consistent with eumycetoma.

He was subsequently placed on 200 mg Itraconazole and 500 mg vitamin C tablets both twice daily. Irrigation with normal saline daily and mupirocin ointment for open wounds was also prescribed.

He has been on this regimen for 7 months with fair drug and clinic adherence. The skin lesion is gradually improving, although slowly. Liver function test is done regularly due to the prolonged use of antifungals.

CONCLUSION: Madura foot although relatively uncommon, is a chronic and debilitating condition which dermatologists need to be aware of. Early diagnosis and treatment are important in achieving a good outcome.

Lupus Vulgaris in A Young Girl: A Rare but Disfiguring Disease with a Rather Unfortunate Delay in Diagnosis (Misdiagnosis)

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BACKGROUND/INTRODUCTION: Lupus Vulgaris (LV) is a rare disorder and it is considered as the most frequent cutaneous form of tuberculosis. Only few cases of LV have been reported, although tuberculosis is still a major health problem in Nigeria. Most times, presentation can be confused with other chronic disorders, some of which are infectious and prevalent in tropical areas as well. We therefore report a case of LV that was wrongly diagnosed as deep fungal mycosis.

CASE PRESENTATION: A 17-year old girl presented with a 9-year history of rash on the face. She had presented to several places earlier and later to the ENT department of UCH, where she was treated for chronic fungal infection after biopsy and histology. She was on antifungal recurrently for 6 years until she was referred for dermatologic consultation.

On examination, she was anxious and had no generalized lymphadenopathy. She had a well demarcated non-healing ulcer involving the nose, lips and neck with destruction of the nasal septum. Diagnosis of lupus vulgaris was suspected and supported by re-assessment of the histological slides. She was commenced on antiTB drugs and had significant improvement thereafter.

CONCLUSION: Lupus vulgaris is a rare but disfiguring disease. Diagnosis may be easily missed in absence of a high index of suspicion with resultant delay in treatment and development of scarring. There is a need to re-educate the public and health workers on the need for early presentation and referral so as to prevent irreversible complications.

Paraneoplastic Dermatoses of Breast Cancer: A Case Report

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Breast cancer is the cancer that develops from breast tissues and remains the most lethal malignancy in women across the world. In 2008, approximately 1.4 million women were diagnosed with breast cancer worldwide, with a corresponding 460,000 deaths. Of these approximately 68,000 women were reportedly diagnosed in Africa, with a corresponding 37,000 deaths. Breast cancer cases continue to increase in low incidence area of Africa and Asia due to 'westernized lifestyle', and better reporting of disease.

Breast cancer may present with many organ dysfunctions, including the skin. Paraneoplastic cutaneous dermatoses have been reported as markers of breast malignancies and include,

amongst others, dermatomyositis, erythema gyratum repens, acquired ichthyosis, multicentric reticulohistiocytosis, hypertrichosis lanuginosa acquisita and alopecia neoplastica.

Here we report the case of a patient who presented with paraneoplastic dermatosis as a sequelae of breast cancer. The patient's clinical features which were in keeping with dermatomyositis (though not supported by histology results) improved much appreciably following the treatment of her breast cancer. Our case report emphasizes the benefit of prompt identification of cutaneous manifestations of internal malignancies, early search for the suspected malignancies and prompt institution of appropriate treatment for the malignancies identified.

Market Survey of Skin Bleaching/lightening Products Available in a University Campus

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INTRODUCTION: The Nigerian market is over flooded with an array of bleaching products which are easily accessible and unregulated. A recent WHO release states that Nigeria tops the list of users of skin lightening creams followed by Togo. This preference for light skin has driven the skin lightening industry encouraging marketers. The health hazards that follow uncontrolled and long-term use of these products are many yet they are easily available over the counter and on the internet for purchase. A particular study specifically documented that 45% of users were students and that the age range varied between 20-30 years.

METHODS: We undertake a survey of bleaching products available for sale in six selected university campus cosmetic shops out of a total of 884 available shops at a central designated market place. The six shops were solely and exclusively devoted to the sales of cosmetics. We documented the spectrum of availability, contents and the prices of their stocked bleaching products.

RESULTS: There was an array of available bleaching products as creams, lotions, gels and soaps. The common names included Caro white, Carotone, DoDo, Clear Plus, Bronze tone, Irish Gold, Pure skin, Fashion fair, Perfect White, Hi white, Diva, Sivoclair, Clinic clear and Skin light. The prices per product ranged from #500(US\$1) to #1,200(US 2.5). There were no warning labels attached about the dangers associated with the use of these products.

CONCLUSION: The unregulated availability of these bleaching products at affordable prices is documented. Bleaching products are easily accessible in our university campus shops and patronage is high. It is recommended that a campaign be launched both to regulate sales and educate potential users in our campuses. Bill boards against indiscriminate use may need to be erected. There should be a campus policy on the sale of potentially dangerous over the counter products.

Rare Case of Unusual Colors and Perpetual Silence: Waardenburg Syndrome in Two Preterm Infant

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BACKGROUND: Waardenburg syndrome is an autosomal dominant disorder of neural crest cells that was first described by a Dutch ophthalmologist in 1951. Prominent features are those of congenital hearing loss

and pigmentary changes which are usually present at birth and affect the skin, hair and the eyes, making early diagnosis and evaluation very possible.

Although there are a couple of case reports in the literature from the developing world, these cases

were often diagnosed in school-aged children who were being evaluated for deafness and other associated cognitive impairment. We present 2 cases of Waardenburg syndrome seen in preterm infant siblings at our neonatal intensive care unit.

METHOD: A female neonate, second of a set of twins delivered at 30 weeks gestational age was admitted at

12 hours of life on account of prematurity. She was found to have dysmorphic features (hypertelorism, low set ears and rocker-bottom feet) with a white forelock and bilateral heterochromia. The mother, a 26-year old chemist also had a white forelock that had

been present since birth and “blue eyes” (bilateral heterochromia) but no history of hearing loss. The first twin, a male had several congenital anomalies (bilateral heterochromia, spina bifida, low set ears, hypertelorism) but no pigmentary changes of the skin or hair. They received routine care of prematurity, and the first twin was co-managed with the neurosurgery team with subsequent repair of the spina bifida. The parents were counselled extensively and the children are presently.

Keywords: Waardenburg, Pigmentary changes, Prematurity

Eruptive Neurofibromas in Pregnancy: A Case Report

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INTRODUCTION: Neurofibromatosis type 1 (Von Recklinghausen's disease) is an autosomal dominantly transmitted disease and is among the most common inherited nervous system disorders. Eruptive neurofibromas - large number of lesions occurring over a short period – have been reported rarely in pregnancy

OBJECTIVE: We report herein a patient who had marked increase in papules and nodules of neurofibromas with every pregnancy and reduction in the size of these lesions few months after delivery.

CASE REPORT: A 24-year old pregnant woman at 32-week gestation presented with a ten year history of multiple nodular lesions which increase in size and numbers at the beginning of each pregnancy. Lesions were associated with itching and pain. There was no family history of similar lesions.

On examination, she had numerous 4-8mm soft, dark brown papules/nodules on the trunk, arms, neck and thighs. She also had multiple café au lait lesions on the trunk, peri-axillary freckles, and mild scoliosis. Eye examination showed no Lisch nodules. A diagnosis of NF1 was made clinically which was confirmed on histology.

DISCUSSION: Eruptive neurofibromas in pregnancy are believed to be due to the influence of hormones and growth factors. Serum oestrogen levels increase in pregnancy and some of these lesions may contain estrogen receptors thus causing an increase in the size and numbers of neurofibromas during pregnancy.

CONCLUSION: We have reported a case of Neurofibromatosis (NF1) in pregnancy which we believe was due to the effect of hormones in pregnancy

The Role of Immune Restoration Using Combine Antiretroviral Therapy In The Management of HIV/AIDS-Kaposi Sarcoma Coexisting With Pulmonary Tuberculosis: A Case Report

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INTRODUCTION: Kaposi sarcoma still remains the commonest malignancy among patients with HIV/AIDS, though incidence have drastically reduced following the introduction and wide use of combined anti-retroviral therapy (cART), just as pulmonary tuberculosis still remains the commonest opportunistic infection among patients with HIV/AIDS.

OBJECTIVE: We report this case to elucidate the role of immune restoration using cART in the management of AIDS related KS, as well as pointing out the possibility of multiple concomitant opportunistic conditions that may present amongst immunocompromised patients.

CASE REPORT: We report a 35 years old known retroviral disease subject diagnosed two years prior to presentation but have never been on highly active antiretroviral therapy (HAART), resorted to alternative/traditional medications. She presented for voluntary counselling and re-testing (VCT),

however with complaints of cough, fever and progressive weight loss of five months duration and body rashes of two months. Clinical examination revealed a chronically ill-looking young woman, wasted and pale. Skin examination revealed dark dusky violaceous papules, plaques and nodules on the trunk, thighs, forearms and lesion on the hard palate. Chest examination shows signs of right upper and middle lobes consolidation. Sputum AFB was positive and skin biopsy taken for histology confirmed Kaposi's sarcoma (KS). Patient recovered fully on only HAART and anti-Koch's without the need for any chemotherapy for the KS lesion.

CONCLUSION: Few cases of disseminated KS coexisting with tuberculosis have been reported in the medical literature. KS lesions can completely regress following immune restoration using HAART without the need for KS specific chemotherapy.