

DERMATOLOGIC DISEASES IN SCHOOL-GOING CHILDREN OF PARENTS HAVING LEPROSY

J S Pasricha and Vijay Battu

All the 138 school children whose parent(s) had leprosy were examined for leprosy or other dermatological disease. BT leprosy was detected in one child, while in 2 other cases, the diagnosis of leprosy was doubtful. Among the other dermatological diseases, the prevalence of pityriasis versicolor and pediculosis capitis was high.

Key words : Leprosy, School children, Dermatological survey.

Bal Niketan is a boarding school for the children of leprosy patients who are undergoing treatment at various leprosy centres in and around Delhi. These children receive education upto the primary school level in these schools, and all of them live together in the boarding house, away from their parents. They all belong to the lower socio-economic class. Prior to admission to this school, the children had lived with their parent(s) for variable periods, and in addition, they are allowed to stay with their parent(s) for a few weeks each year. At school, medical check-ups and treatment are provided by a physician who visits the school periodically. The children however, are not given any chemoprophylaxis against leprosy.

Recently, we examined all these children to enlist the dermatologic diseases/lesions prevalent among them, with a special aim to detect leprosy.

Materials and Methods

All the 138 children were examined. Their ages ranged between 2 and 15 years. Care was taken to look for all types of skin lesions/diseases including those such as pigmented moles, nevi, pityriasis alba, pityriasis versicolor, ichthyosis etc, which are asymptomatic and likely to be ignored by the child.

Twenty five children had both parents having leprosy, while in the case of the remaining

children, only one of the parents had leprosy. Five children in addition had siblings who also had leprosy.

Results

The dermatologic lesions/diseases recorded in these children are given in table I.

Leprosy was detected in only one, 6½-year-old girl who had a single, 4 cm diameter, hypopigmented macule on the right upper arm. The lesion had been slowly increasing in size. The borders were not well-defined and the patch was hypoaesthetic for touch and pain sensations. There was another small satellite lesion near the main lesion but the nerves were normal. This was diagnosed as a case of BT leprosy. Two other children had lesions which could not be confirmed to be leprosy. One of them, a 4½-year-old boy had a 1½ cm, ill defined, hypopigmented macule on the back. The sensory loss in this lesion was uncertain and the nerves were not enlarged. The other patient was a 7½-year-old girl who had two, small 4-5 mm, hypopigmented macules close together on the upper back. The sensory loss in these lesions was also doubtful, and the nerves were normal.

Comments

In a survey to determine the prevalence of dermatologic diseases, it is essential to strip every individual, because many dermatoses are asymptomatic and if the manifestations are not florid, the individual is likely to ignore the disease and not bring it to the notice of the examiner.

From the Department of Dermato-Venerology, All India Institute of Medical Sciences, New Delhi-110029, India.

Address correspondence to : Dr. J. S. Pasricha.

Table I. Dermatological lesions found in a survey of 138 school children of leprosy patients.

Disease	Sex		Number of cases in the age group			Total
	Male	Female	2-5	6-10	11-15	
1. Melanocytic nevi	104	34	9	99	30	138
2. Pediculosis capitis	96	34	5	98	27	130
3. Pityriasis alba	24	12	3	27	6	36
4. Pyoderma	20	6	4	18	4	26
5. Pityriasis versicolor	8	3	0	8	3	11
6. Leuconychia punctata	11	0	0	8	3	11
7. Seborrhoea capitis	5	2	1	5	1	7
8. Miliaria rubra	4	2	0	5	1	6
9. Keratosis pilaris	5	0	0	5	0	5
10. Warts	4	0	1	1	2	4
11. Molluscum contagiosum	4	0	1	1	2	4
12. Angular stomatitis	3	0	0	1	2	3
13. Herpes labialis	2	1	1	2	0	3
14. Tinea corporis	2	0	0	1	1	2
15. Herpes zoster	0	1	0	1	0	1
16. Keloid	1	0	1	0	0	1
17. Ichthyosis vulgaris	1	0	0	1	0	1
18. Pitted keratosis of the palmar creases	1	0	0	1	0	1
19. Leprosy	0	1	0	1	0	1
20. Doubtful leprosy cases	1	1	0	1	1	2

Thus, the reported prevalence of such diseases is likely to be different from the actual prevalence. Prevalence of dermatologic diseases is also likely to be affected by the group of the individuals surveyed, and the time of the year when the survey is conducted because several dermatologic diseases are more prevalent in certain age group and may appear in a particular season and disappear as the weather changes. Moreover, in a survey of a limited number of individuals, all the diseases may not be represented.

The diseases encountered in the present survey are mostly those commonly seen in children. Interestingly, however, the incidence

of pediculosis capitis was very high irrespective of the age and the sex of the children, although the general impression is that pediculosis capitis is more frequent in the girls who keep long hairs. Similarly, although pityriasis versicolor is predominantly a disease of young adults rather than children, 11 cases were recorded in our survey. Occurrence of pityriasis versicolor in children has already been reported.¹

Reference

1. Kumar B, Kaur I, Kaur S : Pityriasis versicolor —an analysis of 175 patients, *Ind J Dermatol Venercol Leprol*, 1984; 50 : 101-105.