

DERMATOSES OF THE HAND-AN OBSERVATION

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After going through 1000 case files of patients registered in the skin department of K.M.C. Hospital, it was found that 166 (16.6%) of them had dermatoses restricted to their hands. Based on the clinical findings and clinical diagnosis recorded, the various dermatoses were tabulated and evaluated. Ninety-two males and 74 females had dermatoses of hands. Warts and eczemas formed the major chunk of cases. Females outnumbered males among patients with warts and eczemas.

Key Words : Dermatoses, Hand, Eczema

Introduction

Inflammation of the hands is one of the most common problems and can cause discomfort and embarrassment as it interferes significantly with normal daily activities.¹ The term hand eczema implies that the hands are predominantly involved by the eczematous process, whereas the body areas are affected less significantly.¹ Contact dermatitis of the hands is one of the major causes for hand eczemas and usually the causative agent is more than one of the common daily use items like soaps, detergents, vegetables, medicaments, dyes etc. This has been proved earlier in various studies,²⁻⁴ and females outnumber males.³ Trauma favours successful inoculation of the HPV and therefore nailbiting predisposes to periungual warts.⁵ The purpose of this study was to enumerate and tabulate some of the common dermatoses of the hands that brings the patient to the dermatologists.

Materials and Methods

One thousand case files of patients registered in

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the Skin and STD department, of K.M.C. Hospital, Mangalore were screened and those with dermatoses restricted to the hands were sorted out and data collected. The clinical data was tabulated according to age, sex and involvement of left or right hand. Dermatoses were tabulated as per the clinical diagnosis made.

Observation and Results

Of the 1000 case files screened 588 were of males and 412 females, giving a M:F ratio of 1.4:1, out of which there were 166 (16.6%) patients having dermatoses of hands. Among them 92(55.43%) were males and 74 (44.57%) females (ratio 1.2:1).

Of the 166 patients with dermatoses of hands 129 (77.71%) had both hands involved. Twenty-one (12.65%) and 16 (9.64%) had left and right hand involvement respectively. Among males, 75 (81.52%) had both hands involved and among females 54 (72.97%) had both hands involved. Nine males (9.7%) and 12 (16.21%) females had only left hand affected, whereas 8 males (8.69%) and 8 females (10.81%) had only right hand affected. Table I shows the distribution pattern of various dermatoses affecting the hands.

Discussion

This study was done to evaluate the regional distribution of dermatoses. The findings were based on the clinical data and diagnosis available in case files. In this study it was observed that warts were the most common of the dermatoses. This study included only those patients in whom only the hands were involved, and not those, in whom adjacent or distant sites of body were also affected.

Females were affected more than males among warts and eczemas of hands. Since most of our women patients were house wives, daily minor trauma, wetness and exposure to various chemical detergents, vegetable and animal protein could be the reason for the higher incidence of eczemas in females. In conclusion it can be said that this study gives a fairly clear picture of the dermatoses that commonly affect the hands but a prolonged prospective study could really be very informative.

References

1. Valia RG, Valia AR. IADVL Textbook and Atlas of Dermatology Vol I, Bhalani Publishing House, Mumbai, 1994, P.366.

Table. I. Distribution of various dermatoses involving hands

Dermatoses	Hand involvement among Males (92)					Hand involvement among Females (74)					Total (166)	%
	Left	Both	Rt	Total	%	Left	Both	Rt	Total	%		
Warts	4	16	6	26	28.26	8	20	2	30	40.54	56	33.73
Eczemas	-	10	-	10	10.86	-	8	4	12	16.21	22	13.25
T.unguium	-	15	-	15	16.31	-	7	-	7	9.4	22	13.25
Pyoderma	2	4	-	6	6.52	-	4	-	4	5.4	10	6.02
T.manum	3	3	-	6	6.52	4	-	-	4	5.4	10	6.02
Vitiligo	-	4	-	4	4.34	-	3	-	3	4.05	7	4.2
Pruritus	-	5	-	5	5.4	-	1	-	1	1.3	6	3.6
Pustulosis Palmaris	-	2	-	2	2.17	-	4	-	4	5.4	6	3.6
Dry discoid eczema	-	4	-	4	4.34	-	2	-	2	2.7	6	3.6
Keratolysis exfoliativa	-	4	-	4	4.34	-	1	-	1	1.3	5	3.01
Paronychia	-	2	-	2	2.17	-	-	2	2	2.7	4	2.4
Hyperhidrosis	-	2	1	3	3.26	-	1	-	1	1.3	4	2.4
L.S.C	-	-	1	1	1.08	-	2	-	2	2.7	3	1.8
Pompholyx	-	2	-	2	2.17	-	-	-	-	-	2	1.2
P.L.E.	-	1	-	1	1.08	-	1	-	1	1.3	2	1.2
Keratoderma	-	1	-	1	1.08	-	-	-	-	-	1	0.6
Total	9	75	8	92	-	12	54	8	74	-	166	-

2. Bajaj AK. Contact dermatitis of hands. Indian J Dermatol Venereol Leprol 1983; 49: 195-199.

3. Singh G, Singh K. Contact dermatitis of hands. Indian J Dermatol Venereol Leprol 1986 ; 52: 152-154.

4. Neena Khanna. Hand dermatitis is beauticians in India. Indian J Dermatol Venereol Leprol 1998; 163: 157-161.

5. Valia RG, Valia AR. IADVL Text book and Atlas of Dermatology. Vol.I, Bhalani Publishing House, Mumbai, 1994, P-262.