PATTERN OF SKIN DISEASES IN INDUSTRIAL WORKERS

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Introduction:

The Pattern of skin diseases in general population is governed by different factors such as economic conditions, housing, habits, sanitation facilities and crowding. These patterns of diseases in General Hospitals have been studied by various authors — Desai, Mehta, Jayaram, Sadhana etc. Their conclusions emphasise the role played by poverty, overcrowding, malnutrition and under nutrition, environmental hygiene, education etc. Industrial workers besides sharing the above factors applicable to general population are exposed to specific environment in a given industry.

City of Poona is surrounded on all sides by industries. This city which was predominantly a centre of learning prior to Independence has grown considerably in last two decades because of development of industries around it. The major concerns of this new development manufacture Engineering products and a few deal with different chemicals etc. In last two decades the overcrowding has considerably increased with the industrialisation of this town.

This article deals with the pattern of skin diseases in industrial workers who get the benefit of the Employees State Insurance Scheme (E.S.I.S.)

Hon. Skin & V. D. Specialist, Sassoon General Hospitals, Poona & Employees State Insurance Scheme, Poona Received for Publication on 12-1-1972, The Employees State Insurance Scheme (E.S.I.S.) has opened a Diagnostic Centre at Gadikhana, Shivaji Road, Poona, which had been functioning since 15-8-65. The Centre caters specialist services in skin and V.D. twice a week. On an average about twentyfive patients – including new and old – are examined, investigated and advised at each section. They are further followed up once in 10-15 days. In the initial stages the scheme covered only the industrial workers. Now their families are also being given the benefit.

Usually the patients are primarily looked after by the panel of doctors of E.S.I.S. Only those patients who have either diagnostic problems or who fail to respond to treatment suggested by panel doctor are referred for opinion and guidance to the diagnostic centre.

Material & Methods:

This study covers 702 patients referred by panel doctors only. No direct patients are entertained. However, the patients have the choice to demand a reference to the Diagnostic Centre. All patients in this study are Industrial workers. (In initial stages the scheme did not cover families.)

The patients are clinically examined and investigated, if necessary. Clinical Laboratory with routine investigation facilities including Histopathology is attached to diagnostic centre. The patients are followed periodically to see the response and guided for further line of treatment.

Results:

TABLE No. 1
Distribution according to Sex.

Distributi	on according	to bea.	
Males		686	
Females		16	
	Total	702	

TABLE No. 2 Distribution according to age.

Age Group	· N	No. of Patients	
11 — 20		92	
21 — 30		411	
31 — 40		120	
41 — 50		89	
	Total	702	

TABLE No. 3
Pattern of Diseases.

Diagnosis	No. of Patients
Eczematous Dermatitis	48
Chronic Eczema	39
Allergic Dermatitis	41
Occupational Dermatoses	29
Drug eruptions and photodermatoses	14
Pruritus, Prurigo & Urticaria	13
Erythematosquamous Dermatosis	27
Papular Dermatosis	11
Bullous Dermatosis	nil
Bacterial & Protozoal Infections	88
Tuberculosis & related conditions	2
Leprosy	31
Viral Infections	10
Parasitic Infestations	65
Dermatomycosis	166
Diseases of sebaccous glands	52
Pigmentary disorders	9
Collagenosis	13
Metabolic disorders and internal disorders	11
Alopecia Areata	4
Neurodermatitis	29
Total	702

Discussion:

The Pattern of skin diseases is more or less identical to the pattern seen at a skin department of General Hospital. This happens because the socio-economic and environmental conditions of the workers and the population at large are similar. (The scheme covers workers from lower income group.)

Though the percentage of infectious disorders is similiar, the number of cases of scabies is less because most of them are relieved at the hands of panel doctors. Percentage of occupational dermatoses is small (4%) partly because most of the industries around Poona are of Engineering and Allied Products. Besides several concerns provide necessary medical aid at their own Units.

Conclusions:

- 1. 702 workers covered under E.S.I. Scheme have been studied for causative agents for their dermatoses.
- 2. Most common conditions encountered were parasitic infestations.
- Amongst the occupational dermatoses (4% of total) Oil acne were the commonest.
- 4. Distribution of other diseases were more or less the same as found in a General Hospital.

Acknowledgments:

I am grateful to the Administrative Medical Officer, E.S.I. Scheme, Poona for permitting me to publish this paper.

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