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ACNE, ROSACEA, AND RELATED DISORDERS (INCLUDING HIDRADENITIS SUPPURATIVA)

ROSACEA AND CARDIOVASCULAR RISK: THE RED DERMATOLOGICAL ALARM

M El Amraoui⁽¹⁾ - N Hjira⁽¹⁾ - M Boui⁽¹⁾

Mohammed 5 University, Dermatology-venereology, Mohammed V Military Teaching Hospital, Rabat, Morocco⁽¹⁾

Background: Rosacea is a chronic inflammatory dermatitis of the face, of multifactorial etiopathogeny. Currently, it is accepted that rosacea is only the tip of the iceberg. Several recent studies suggest an increased risk of cardiovascular morbidity and mortality in patients with rosacea.

Objective: confirm or rule out increased cardiovascular risk in patients with rosacea.

Materials and methods: Prospective study, conducted over a period of 18 months (February 2016 - July 2017), in the dermatology department of the Mohammed V Military Hospital of Rabat, comparing a population of 100 patients with rosacea (R) and one population reports (N) 100 matched age and sex cases. The study consisted of the study of major cardiovascular risk factors (CVRF) (diabetes, hypertension, dyslipidemia and android obesity) and other cardiovascular diseases (CVD) in both populations.

Results: The incidence of CVRF in the R population was (HTA: 21%, Diabetes: 16%, Dyslipidemia: 25%, and Obesity android: 23%), making a total of 85 CVRF in the R population, then that the incidence of CVRF in the N population was (HTA: 6%, Diabetes: 5%, Dyslipidemia: 9% and Obesity android 14%), making a total of 34 CVRF in the N population. In the R population, 17 patients (17%) had CVD (3 ischemic heart disease, deep vein thrombosis, 11 lower extremity varicose veins and 2 cases of livedo and acrosyndroma), whereas in population N, 2 patients presented with CVD (ischemic heart disease and lower extremity varicose veins).

Conclusion: Rosacea is a multifactorial chronic facial dermatosis that remains enigmatic and follows psoriasis to the metabolic syndrome. The appearance of rosacea at a young age is a warning sign with an increased risk of cardiovascular disease in adulthood. Thus, patients with rosacea require a lifestyle stricter and more stringent than the normal population.





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