



DERMATOPATHOLOGY

FACIAL DERMATOSES, EPIDEMIOLOGICAL AND CLINICAL PROFILE ABOUT 564 CASES

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Introduction: Facial dermatoses are very varied, they are a frequent reason for consultation. Most etiologies remain of favorable prognosis.

Objective: The purpose of this study is to describe the epidemiological and clinical profile of these dermatoses.

Material and methods : Prospective descriptive and analytical study conducted in the dermatology department of CHU Hassan II of FES (January 2016 to December 2016). Inclusion criteria were all patients presenting for dermatological consultation or hospitalization for facial symptomatology.

Results: 564 patients were included. 387 women and 177 men. The average was 30 years. 78% were from urban areas. Chronic sun exposure was found in 10%. The notion of topical application was found in 38%. Phototype IV was predominant in 59%. The associated extra-facial location was found in 58%. Pruritus was the predominant sign in 28% and tingling sensation in 11%. Other complaints were found including pain, discomfort secondary to ulceration. The etiologies found were dominated by inflammatory pathologies in 52%, predominated by acne in 75%. Seborrheic dermatitis, eczema, atopic dermatitis, psoriasis, and rosacea were found in approximately 12% of cases each. Malignant tumoral pathology was found in 41 cases and mainly basal cell carcinomas in 49%. Squamous cell carcinomas and lymphomas in 25% of cases each. Infectious origin was found in 44 cases, and predominated in children. The most common pigment disorders were vitiligo and melasma. The systemic and autoimmune origin was noted in 60 cases. Cutaneous biopsy was indicated mainly in tumor pathology. In hospitals, the predominant type of pathology was systemic diseases, malignant tumors requiring an extension assessment, and certain inflammatory or infectious diseases. While in consultation, pigmentary disorders, and non-systemic inflammatory pathologies were predominant.

Conclusion: This study highlights the frequency and richness of pathologies that can affect





the face. In the young, the inflammatory origin is predominant and it is often a source of aesthetic damage. In the older population, neoplastic pathology ranks first and often involves functional prognosis. While in children, infectious diseases are the most common especially bacterial and viral.

