



EPIDEMIOLOGY

A COMPARISON BETWEEN DERMATOLOGICAL CONDITIONS AFFECTING MEDICAL INPATIENTS AT A TERTIARY HOSPITAL IN KOLKATA, INDIA, TO THOSE IN CAMBRIDGE, UK

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Introduction: Dermatological disease must be noted not only in specialist clinics, but also in hospital inpatients. This contemporary study aims to investigate the differences in the dermatology of medical inpatients in two different countries.

Objective: My aim was to identify similarities and differences in dermatological disease, in this cross-sectional comparison between patients at tertiary hospitals in India and the United Kingdom.

Materials and Methods: A sample of 50 patients from each tertiary hospital was taken. The cohort from the Seth Sukhlal Memorial Hospital in Kolkata, India, were clinically examined and those with dermatological disease selected continuously from both the male and female wards in August 2017. In contrast, the electronic patient records system was utilised to identify any patients with coded dermatological disease in Addenbrooke's Hospital, Cambridge, from one specific mixed ward. An International Classification of Diseases (ICD-10) code was attributed for each dermatological condition identified, and all information analysed on a spreadsheet.

Results: Patient demographics were markedly different in the two populations, with an average age of 47.5 in India and 74.2 in the UK. In regards to disease, the most prevalent condition in Indian inpatients was Tinea capitis, whilst in English inpatients was squamous cell carcinoma, bruising and cellulitis. The predominance of infectious causative agents in the Indian hospital was evident, with the other common conditions like candidiasis and scabies. There was additionally greater variance in the diseases present in the Indian cohort (32), to those in the UK group (18).

Conclusions: This cross-sectional study highlights important differences in the diseases and demographics between these two populations. Additionally, it was interesting to note weaknesses in the ICD-10 classification of dermatological disease, and how certain conditions were not considered dermatological as they were, for example, infectious or





neoplastic in nature.

