



HAIR DISORDERS

CLINICAL CHARACTERISTICS AND QUALITY OF LIFE IN ACNE KELOIDALIS NUCHAE PATIENTS

Olusola O Ayanlowo⁽¹⁾

College Of Medicine, University Of Lagos, Medicine, Lagos, Nigeria⁽¹⁾

Background: Acne keloidalis nuchae (AKN) is a chronic inflammatory disorder which affects males of African descent. Clinical presentation varies from pruritic follicular papules and pustules in the occipital and upper neck region, to hyperkeratotic papules and keloidal lesions.

Objective: This was a cross sectional study to determine clinical characteristics and quality of life (QoL) in patients with AKN at the dermatology clinic of the Lagos University Teaching Hospital.

Materials and Methods: Questionnaires were applied to consecutive male patients to establish the demographics, hair care practices and symptoms. Each patient filled the dermatology life quality index (DLQI). The clinical features were documented according to severity using a proposed scale. Stage 1: follicular papules and pustules with or without crusting; stage 2: hyperkeratotic follicular papules with early keloidal papules and small keloids (1cm or less) with scars; Stage 3 was purely keloidal lesions with crusts and scars; and stage 4: Keloidal tumors with scars, abscesses, sinuses and discharges.

Results: Seventy patients were recruited; age range 13 – 58 years; and mean age 32.1±10.5 (SD). Forty-eight patients 48 (68.6%) were in their 3rd and 4th decades of life; mostly (55-78.6%) after one year of onset of lesions. There was a positive family history in 12 (17.1%). Thirty-two patients (45.7%) presented with follicular papules and pustules designated as acne folliculitis nuchae (stage 1), while others presented with keloidal lesions of varying severity (stages II to IV). Lesions were mostly associated with alopecia and dissecting folliculitis. The mean effect on the QoL was 5.3 ± 5.5 (SD) representing small to moderate effect. The domain most affected was symptoms and feelings.

Conclusion: Most Individuals with AKN presented late with affectation of QoL in the domains of symptoms and feelings. Early treatment of follicular lesions will prevent progression to keloidal lesions and improve the QoL.

