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PIGMENTATION

TO STUDY THE CLINICAL PROFILE AND TO ASSESS THE QUALITY OF LIFE IN 500 PATIENTS OF MELASMA

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Introduction: Melasma is one of the most common and distressing pigmentary disorder presenting to dermatology clinics. The precise cause of melasma remains unknown; however, there are many possible contributing factors. It is difficult to treat and has a tendency to relapse. Its population prevalence varies according to ethnic composition, skin phototype and intensity of sun exposure. Due to its frequent facial involvement, the disease has an impact on the quality of life of patients.

Objectives: To study the clinical profile and clinical severity of patients of melasma and to assess their quality of life by using MELASQoL and DLQI scales.

Material and Methods: All patients with melasma were screened. A detailed history, clinical examination, and relevant investigations were done. Severity of melasma was assessed by calculating Melasma Area Severity Index (MASI) score. Quality of life was assessed using MELASQoL and DLQI scale with a standard structured questionnaire.

Results: In 500 cases of melasma, 395 were females and 105 were males. Most common age group affected was 21- 30 years (45%). Sun exposure was found to be the most common aggravating factor observed in 35% of cases. Centrofacial type (69%) was the most common pattern observed. Mean MASI score was 7.61±4.98. Mean MELASQoLand DLQI scores were 33.36±13.49 and 9.37±5.28 respectively, with most patients being bothered about their appearance, frustrated and embarrassed about their skin condition. A positive correlation was found between QoL and severity of melasma.

Conclusion: The study suggested that melasma significantly affect patient's quality of life. The patients with increased severity of disease were found to have a poorer quality of life as compared to patients with a less severe disease. Both MELASQoL and DLQI scores are useful tools to assess the QOL of patients and they should be a given a due consideration before deciding the treatment plan.





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