



PSYCHODERMATOLOGY

## DERMATITIS ARTEFACTA: REPORT OF 59 CASES.

*Nadine Kammoun<sup>(1)</sup> - Sonia Boudaya<sup>(1)</sup> - Rim Chabouni<sup>(1)</sup> - Sana Miledi<sup>(1)</sup> - Rim Sallemi<sup>(2)</sup> - Emna Bahloul<sup>(1)</sup> - Madiha Mseddi<sup>(1)</sup> - Jawaher Masmoudi<sup>(2)</sup> - Hamida Turki<sup>(1)</sup>*

*Hedi Chaker Hospital, Dermatology, Sfax, Tunisia<sup>(1)</sup> - Hedi Chaker Hospital, Psychiatry, Sfax, Tunisia<sup>(2)</sup>*

**Background:** Dermatitis artefacta (DA) is a psychocutaneous disorder where the skin lesions are self-induced to satisfy an unconscious psychological or emotional need.

**Objective:** To describe the epidemiology, clinical features, psychological management and clinical course of patients with DA.

**Materials and Methods:** A retrospective study was followed in the department of dermatology over a period of 19 years (2000–2018).

**Results:** Fifty nine patients were included. The mean age was 37.7 with 46 women and 13 men. A triggering factor (emotional shock, family or professional problems) was reported in 36.38% of cases. The clinical aspects included: erythema (27.11%), ulcerations (23.72%), blisters (20.33%), erosions (16, 9%), dyschromic scars (11.86%), cutaneous necrosis (6.77%), erysipeloide lesion (5.84%) and pseudo-urticaria (1.69%). These lesions evolved from one day to 10 years. The most common location was the limbs (74.57%), followed by face (20.33%), breasts (13.55%), trunk (11.86%), buttock region (8.47%), and external genitalia (3.38%). Twenty six percent of patients had multiple lesions. Eleven patients (18.3%) already had a psychiatric history: depressive syndrome (6.77%), schizophrenia (5%), self-injurious behavior disorder (1.69%), chronic psychosis (1.69 %), anxiety disorder (1.69%) and intellectual disability (1.69%). A psychiatric consultation was accepted by 29 patients (49.1%) showed: histrionic personality disorder (13.55%), depression (10.16 %), anxiety disorders (11.84%), schizophrenia (6.77%), personality disorders (5.08%), and mental debility (1.69%). The treatment included local care in all patients with antibiotic therapy, if necessary, associated with psychiatric care. Recurrence was noted in 36% of patients.

**Conclusions:** The results confirm the usual characteristics of DA such as predominance in young female patients, with lesions of various and bizarre forms affecting visible areas. In contrast with published studies, in our series a relatively frequent attack of inaccessible areas was noted (23.71%) and no cases of attempted suicide were observed, hence the





interest of an examination and psychiatric treatment.

