



RESEARCH ARTICLE

ASSESSMENT OF PSYCHOSOCIAL IMPACT IN PATIENTS WITH PITYRIASIS VERSICOLOR- AN OPEN LABELLED, CLINICAL AND QUESTIONNAIRE BASED STUDY

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ABSTRACT

Background: Pityriasis Versicolor (PV) is a cutaneous pigmentation disorder caused by a lipophilic yeast of the genus *Malassezia* sp. It is a superficial mycosis characterized by well-defined, slightly scaly skin lesions of variable color. Pityriasis versicolor is a very common, easily treatable superficial fungal infection, and is neglected by many patients.

Aim: To determine the quality of life and psychological impact in patients with pityriasis versicolor.

Methods: Forty patients diagnosed clinically pityriasis versicolor were selected for the study and were asked to complete a questionnaire form. The questionnaire was prepared in house. There were 21(52%) females and 19 (47%) Males.

Results: Analysis of the questionnaire showed that 90% of females and 52% males were psychologically affected.

Conclusions: Pityriasis versicolor, though innocuous and common, may lead to psychosocial issues in predisposed people. In such cases, prompt and adequate treatment helps a lot to restore the confidence and quality of life.

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INTRODUCTION

Pityriasis versicolor (PV) is a cutaneous pigmentation disorder caused by a lipophilic yeast of the genus *Malassezia* sp. It is a superficial mycosis that occurs worldwide, especially in tropical and subtropical regions. In temperate regions, a higher incidence of PV occurs during summer and autumn. (Murray et al., 2006) Seven species of the gender *Malassezia* are routinely known: *M. furfur*, *M. pachydermatis*, *M. sympodialis*, *M. globosa*, *M. obtusa*, *M. restricta*, and *M. slooffiae*. All but one of these species require external lipids for their development. *M. pachydermatis* is the only one that grows on routine mycological media without lipid supplementation. With application of molecular techniques, six new species have been identified: *M. dermatis*, *M. japonica*, *M. yamatoensis*, *M. nana*, *M. caprae*, and *M. equine* (Cabañes et al., 2007; Hirai et al., 2004; Sugita et al., 2002) *M. furfur* was considered the main etiologic agent of PV for a long time. (Aspiroz et al., 2001) PV-caused skin lesions are characterized by well-defined

macules, with slight desquamation and color ranging from white to brownish and brown. Such lesions may spread and coalesce to cover large areas, thus compromising trunk, shoulders, upper limbs, neck, face, and flexural folds. (Lima et al., 2002) However in some cases, the lesions can be stubborn and persistent, and may lead to psychological unease, especially if situated on exposed sites leading to social embarrassment. If extensive and hypopigmented lesions occur chronically on exposed sites, it can lead to cosmetic disfigurement and psychological impact. The aim of this study was to investigate and compare quality of life and psychological status of patients with pityriasis versicolor.

MATERIALS AND METHODS

It was a prospective, open-labelled, questionnaire based study. Patients were selected on the basis of clinical diagnosis of Pityriasis versicolor (Figure 1) and their agreeability to fill up the questionnaire. Only adults aged 18 and above were selected. The history and clinical findings were entered in the proforma and patient is asked to complete the questionnaire form (Table 1). Self prepared questionnaire containing 8 questions were given to the patient to fill up. The answers were

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graded as "extremely", "moderately" and "slightly", nil having score of 3, 2, 1, 0 respectively. Scores were added up and results analyzed.



Figure 1. Hypopigmented macules on face

Inclusion criteria

All patients above 18 years clinically diagnosed as pityriasis versicolor. Those with lesions more than 1 month duration.

Exclusion criteria

Children
Patients not willing to complete questionnaire form.

RESULTS

Total of forty patients were taken, out of which twenty one were females and nineteen were males. Among 21 females, fifteen patients were students, three were housewives and three were office workers. Among nineteen male patients, ten were students, five were office workers and four were agriculturist. Among female patients ten patients were extremely affected while as eight patients were moderately affected. Thirteen patients were extremely self conscious, affected their dressing, social activity and also work and studies while two patients were moderately affected in view of dressing, social activity and work and studies. Thirteen patients had to face questions regarding their lesions and none had any difficulty in interpersonal relationship. Nineteen patients believed that excessive sweating is the cause for the lesions and two thought it was contagious. Among males seven patients were extremely affected and self conscious, while three patients were moderately affected. Eight males had to face questions about the condition, and none had any relationship issues. Seven males thought that sweating was the cause for the disease, whereas three thought it to be due to contact as well as sweating.

Table 1.

Proforma

Name:
Age:
Occupation:

Hospital No:
Sex:

Chief complaints:

Duration:

Symptoms: Itch/ none.

CLINICAL FEATURES:

Site affected:

Type of lesion: hyperpigmented/hypopigmented/ both.

Scales : present or absent.

Body area involved:

Treatment taken before:

QUESTIONNAIRE:

1) Are you adversely affected by the condition in anyway? (0-3)

No

Slightly

Moderately

Severely

2) Are you conscious about your patches (0-3)

No

Slightly

Moderately

Severely

3) Do you consciously try to cover your lesions with appropriate clothes, scarves etc.? (0,1)

No

Yes

4): Does it affect your social or leisure activities? (eg swimming, wearing low necked clothes?) (0-3)

No

Slightly

Moderately

Severely

5) Do you think often about the condition (0-3)

No

Occasionally

2-3 times/week

Almost daily

5) Does it affect your work or study? (eg excessive thinking about your problem) (0-3)

No

Slightly

Moderately

Severely

6) Does it affect your relationship? (friendship/family/ coworkers). (0-3)

No

Slightly

Moderately

Severely

7) Have you had to face adverse comments regarding the lesions? (0,1)

No

Yes

8) What is your perception about the disease and the cause for it

Contact /clothes / sweating / others

DISCUSSION

The present study showed females were more affected than males and students & office workers were more affected than agriculturist. Majority of patients believed the cause to be sweating, followed by contact with affected person. There are no other studies on psychological effect. So no comparison could be made.

Limitations

Small study, self made questionnaire. Larger group should be used. Psychologist help should be sought.

Conclusion

Though Pityriasis versicolor is a common superficial fungal infection, especially in humid tropics, recurrent, chronic lesions over exposed sites can pose a psychosocial problem. In such cases, prompt and adequate treatment helps a lot to restore the confidence and quality of life.

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