Prevalence of Skin Diseases in Old Age

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Abstract. The prevalence of skin disorders was studied in an elderly population comprising 584 individuals. The mean age was 80 years (range 55–106). The prevalence of pityriasis of the scalp and asteatosis was high, 44.3% and 28.9%, respectively. *Psoriasis vulgaris* was found in 2.9%, *vitiligo* in 1.2%, and *contact dermatitis* in 3.8% of the group.

Key words: Asteatosis; Geriatric patients; Pityriasis; Prevalence; Psoriasis; Vitiligo

It seems evident that the frequency of skin diseases in elderly patients referred to private practice or to hospital ward gives an inaccurate picture of the occurrence of dermatoses in old age. Increasing age is accompanied by physical and mental disability, self-neglect and failure to evaluate a condition and often a disinclination to bother the doctor. Therefore, in order to avoid an age-dependent selection of dermatological diagnoses the elderly patient must be sought out in his own surroundings. This was performed 25 years ago by Droller (1) who studied the occurrence of skin disorders among 476 old people living at home in Sheffield, England.

In the present study the prevalence (i.e. the proportion of affected individuals in a population at a certain time) of skin diseases in elderly institutionalized persons is reported.

MATERIAL AND METHODS

Five hundred and eighty-four elderly persons (175 males and 409 females) living in a municipal old peoples' home in Copenhagen, Denmark, were studied. The age distribution, mean age and range of age, is seen in Fig. 1.

The skin condition of the inhabitants was examined clinically at four weekly visits to the wards during September 1976.

RESULTS

The dermatological diagnoses are listed in Table 1. In 452 persons (77.4% of total) various common skin disorders were observed. In the remaining 132 persons (22.6%) the skin condition was judged to be normal, according to age.

Twenty-six patients (4.5%) showed various combinations of scaly skin changes suggestive of a chronic zinc deficiency and were investigated in a separate study. The results, which have been published earlier (10), failed to reveal any connection between the selected skin manifestations and a state of zinc deficiency.

DISCUSSION

The high prevalence of pityriasis and asteatosis observed here is probably a consequence of reduced ability of senile skin to retain water, excessive use of soaps and shampoos, and low humidity in the institutions (7). Tindall & Smith (8) found significantly dry skin in 77% of 163 older persons. The findings stress the importance of application of lubricants to the senile skin, since dry skin is the commonest cause of generalized itching in older persons (7).

In Verbov's series (9) the most common diagnoses of 170 referred skin patients aged 60 to 90 years were skin tumours (28.2%), eczemas (24.7%), leg ulcers (14.1%), and psoriasis (11.2%). In a group of private dermatological patients over 70 years of age Epstein (2) noted a high proportion

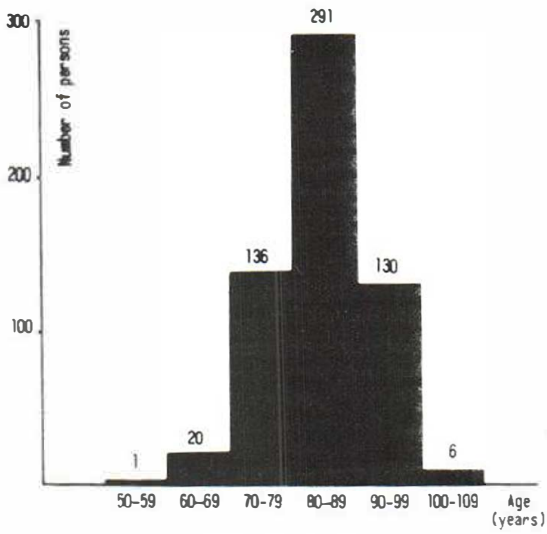

Fig. 1. Age distribution of 584 elderly persons investigated for prevalence of skin diseases. The mean age was 80 years (range 55 to 106 years).

Table I. *Ranked prevalence of skin disorders in 584 elderly institutionalized persons*

	Number of conditions[a]	Prevalence (%)
Pityriasis of the scalp	259	44.3
Asteatosis (including localized and widespread eczema craquelé)	169	28.9
Seborrhoeic dermatitis (face, scalp, chest)	41	7.0
Stasis dermatitis	40	6.9
Xanthelasma palpebrarum	27	4.6
Contact dermatitis	22	3.8
Psoriasis vulgaris	17	2.9
Pressure sores	13	2.2
Leg ulceration	9	1.5
Vitiligo	7	1.2
Rosacea cum acne	1	0.2

[a] 605 skin conditions were present in 452 patients, i.e. several patients had more than one skin disorder.

of senile keratoses, eczemas and seborrhoeic keratoses. The differences in frequency and rank of dermatoses in the two selected series and in the present population study is obviously due to selection of the patients who seek dermatological aid. Elderly patients are not frequent visitors to dermatological clinics. Epstein (2) found that patients over 70 years of age comprised only 8% of his private patient group.

The observed 2.9% prevalence of psoriasis in old-age is close to 2.84% in the normal population of the Faroe Islands, reported by Lomholt (6).

Vitiligo was present in 1.2% of the old-age population group, which is close to 1.4% prevalence reported among patients admitted to a Danish county hospital (3). Age-specific prevalence of vitiligo was studied on the Isle of Bornholm, Denmark, by Howitz et al. (5). They found a prevalence of 0.9% in the ages of 60 to 70 and 0.6% after the age of 70. These figures are inexplicably lower than observed in the present investigation.

Clinical evidence of contact dermatitis was found in 3.8% of the old people, which is within the range of prevalence in normal populations reported from other parts of Scandinavia (1.5 to 4.8%) (4).

In Droller's study (1) 25% of the old people living in their homes had leg ulceration. The low prevalence of leg ulcers (1.5%) and of decubitus (2.2%) reported here must be viewed in the light of the careful nursing and the good nutritional status of the group as a whole.

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Dermatitis Herpetiformis and Gluten-Sensitive Enteropathy in Monozygotic Twins

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Abstract. Of two monozygotic twins, one had dermatitis herpetiformis, while the other had gluten-sensitive enteropathy. The literature on twins is reviewed.

Key words: Dermatitis herpetiformis; Gluten-sensitive enteropathy; Twins

The high familial incidence of gluten-sensitive enteropathy (GSE) is well known (7). It has been stated that the pathogenesis of GSE is multifactorial, the genetic basis of susceptibility being