

COMPARING RATE AND TYPE OF SKIN DISORDERS IN COMMUNITY DWELLING ELDERS TO THAT OF PATIENTS IN A GERIATRIC CENTER

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Purpose:

Skin disorders are very common among elderly people and the incidence of many of them is increasing with age (eg. non melanotic skin cancers and chronic skin infections). This study compares the incidence, extent and type of skin problems in two different elderly populations: independent community dwelling elders and a variety of disabled patients in a long-term care facility.

Methods:

Between January 1 and June 30, 2002, skin evaluation was carried out by a dermatologist (RD) in patients of the Shoham Geriatric Medical Center (SGMC), who were referred for consultation. During the same period, dermatological evaluation was performed by the same physician in an outpatient clinic (OPC), in community dwelling elderly patients who were referred by their family physician.

Results:

180 elderly patients (63% females) of the SGMC and 134 (59% females) community dwelling elders, have been referred for dermatological evaluation. The average age was significantly higher at the SGMC as compared to the OPC (83.4 \pm 10.8 Vs. 69.6 \pm 7.6, respectively, $p < 0.01$). The rate of repeated visits was significantly higher at the SGMC as compared to OPC (2.26 Vs. 1.27 visits per patients per 6 months, respectively). The main problems requiring repeated follow up visits were non melanotic skin cancer (NMSC, mainly for cryotherapy) and fungal disorders. The most common dermatologic problems at the SGMC were chronic infectious diseases (24%, mostly fungal), NMSC (22.8%), scabies (9.7%) and solar keratosis (6.4%). In the OPC, the most common problems were also chronic skin infections (25%), solar keratosis (22.8%), onychomycosis (15%), xerosis (9%), seborrheic keratosis (9%) and seborrheic dermatitis (6.7%). Only a few patients had NMSC and none had scabies (Figure 1).

Conclusions:

In both the geriatric center and community dwelling elders, the most common skin problem was chronic infection mainly fungal diseases. At the SGMC the second most prevalent skin problem was NMSC, the later being much less common at the out- patient clinic. Scabies was the third in incidence at the SGMC (mainly due to new patients from hospitals) but was not found in elders in the community.