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Diploma in Pharmacy 2nd Year Pharmacotherapeutics Chapter 2 (i): Dermatology

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Dermatology

Psoriasis





PHARMACOTHERAPEUTICS

Chapter 2 (i) Dermatology

- → Dermatology is the branch of medical science in which we study about the skin abnormality appears due to any infections or allergic conditions. In skin disease we discuss many conditions like
 - Psoriasis
 - Scabies
 - Eczema

Psoriasis

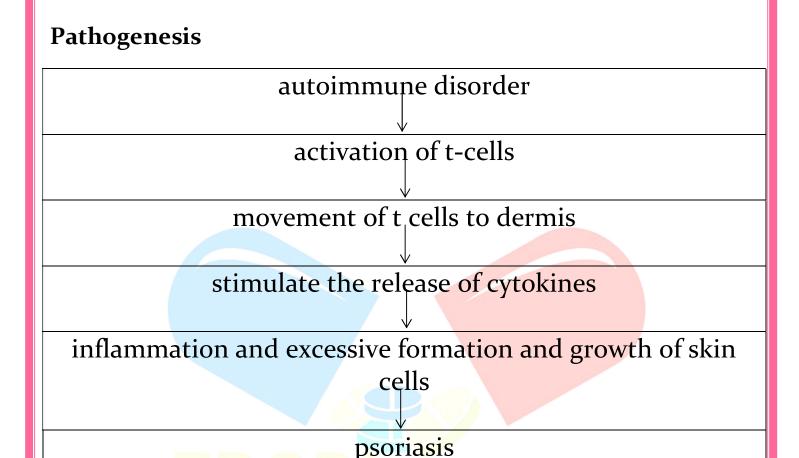
- → Psoriasis is a chronic autoimmune disorder in which the skin cells build up rapidly and form thick, pink or red coloured, itchy and dry patches, covered with white or silvery scales. It is called plaque.
- → These patches can develop anywhere on the body . it may be some patches or can cover a large area of skin.



Etiology

- Over activation of immune when it triggered causes inflammation and leads to rapid formation of new skin cells . triggers of psoriasis are following :
- Streptocoal or other infection.
- Certain drugs (like lithium , ß blocker etc.)
- Cold weather or less or more exposure to sunlight .
- Stress
- Skin injury





Clinical Manifestations

- Psoriatic arthritis.
- Patches covered with silver white flakes.
- Raised and thick skin.
- **♣** Dry, swallow and inflamed patches.
- **♣** Pain, itching, and burning sensation.
- ♣ Red spots on the body.

Non Pharmacological Managements

- ❖ Diet is an important factor in the skin disorder because some food causes the skin allergy and leads to severe conditions.
- Self-awareness is very important because we need to know which substance cause allergy (allergens like dust, smoke, pollen, food etc).
- * Regular hygienic activity is very important factors to overcome the skin disorder conditions. (Like regular bathing, wearing dry and clean clothes etc).
- Regular yoga and physical activity also overcome the disease by maintain the immune system in proper condition

Pharmacological Management

- ♦ **Steroid creams**: To suppress the immune system
- **Anthralin cream**: It slows down the growth of skin cells.
- **♦ Methotraxate**: It prescribed in severe cases.
- **Order State :** It is an oral corticosteroid, it is immunosuppressive.
- ♦ **Moisturisers**: They are used to reduce dryness of skin.

Scabies

- → Scabies is an infectious disease of the skin by the human itch mite.
- → The microscopic scabies mite burrows into the upper layer of the skin where it lives and lays its eggs.
- → The most common symptoms of scabies are intense itching and a pimple-like skin rash.
- → The scabies mite usually is spread by direct, prolonged, skin-to-skin contact with a person who has scabies.
- → Scabies is one of the commonest dermatological conditions, accounting for a substantial proportion of skin disease in developing countries.
- → Globally, it is estimated to affect more than 200 million people at any time, although further efforts are needed to assess this burden.



Etiology

• It is caused by Sacroptes Scabiei Var Hominis



Pathogenesis

Sacroptes Scabiei Var Hominis

Move to skin

Formation tunnel beneath the skin

Scabies (itching Lumps)

Clinical Manifestations

- Formation of plaques.
- Thickening of skin.
- ♣ Puffy and red eye lids.
- ♣ Hyperpigmentation of skin.
- Oozing of lesions.
- Formations of cracks.
- ♣ Itching, and burning sensation.

Non Pharmacological Managements

- Proper Hygiene
- ❖ Other should avoid a close contact with affected person

Pharmacological Managements

- **Topical creams and lotions :** Permethrin Cream and lotion and Calamine lotion can be used.
- **Antibiotics**: Oral Ivermectin is used when topicals don't give good responses.
- **Antihistamines :** Ceterzine , Promethzine , diphenhydramine etc. these are used to relieve itching



Eczema

- → The term Eczema has been derived from the Greak word eckzin which means to boil over or break out.
- → Eczema is a group of medical conditions which causes inflammation and irritation to the skin . It is also called dermatitis, But all type of inflammations are not eczema.



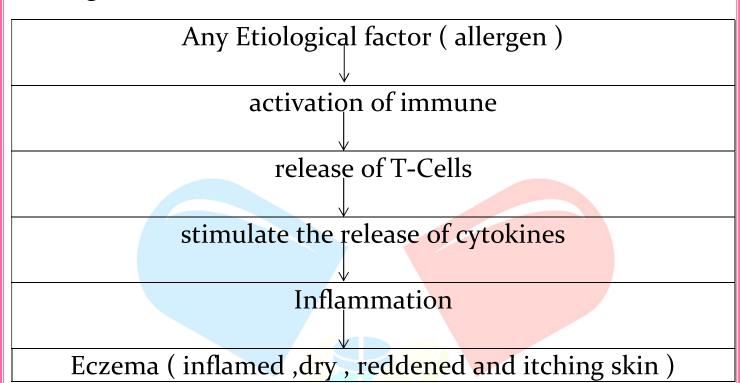
Types

- Atopic Dermatitis: It the most common form of eczema . inflamed , Dry and itchy skin, commonly affect the children , it can be occur at any age.
- Contact Dermatitis: It is also called allergic contact dermatitis, this is occurs due to environmental allergic reaction.
- > **Dyshidrotic eczema**: It occurs more commonly in women, it causes the dryness of skin and a burning sensation and painful rashes and blisters on palms of hand and soles of feet.
- Numular Dermatitis: It causes small ,rounded lesions all over the body , but specially on arms and legs.
- > **Stasis Dermatitis**: It occurs on the lower legs due to poor blood flow and causes discoloration of legs.

Etiology

- Irritants : like shampoo , shops , detergents etc.
- Cold or dry weather.
- Cigarette
- Stress
- Allergens (pollen, mold, dust, mites)
- Genetic factors
- Immunological disorder

Pathogenesis



Clinical Manifestations

- **↓** Itching, and burning sensation.
- Dryness of skin.
- Cutaneous reactivity.
- **♣** Chances of secondary or internal tissue infections.

Non Pharmacological Managements

- Proper hygiene
- Allergens should be avoided

Pharmacological Managements

- **♦ Prescribed Topical steroids creams :** Clobetasole , mometasone , triamcinolone.
- **Moisturisers**: They are used to reduce dryness of skin.
- Antihistamines: Ceterzine, Promethzine, diphenhydramine etc. these are used to relieve itching



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