



Clinico-Dermoscopic Study of Topical Steroid Damaged Facies

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Background

Topical steroids are rampantly abused, causing cutaneous reactions resulting in Topical steroid dependant facies (TSDF). There is a need for early management to prevent irreversible changes. Dermoscopy acts as a non-invasive modality for early diagnosis of subclinical signs of TSDF.

Aim

This study was designed to characterise dermoscopic features of TSDF and correlate them clinically.

Methods

This was a one-year hospital-based observational study conducted on 122 patients above 18 years of age, with history of application of medium to super potent topical steroids over face for more than 6 weeks. Patients with pre-existing lesions or those using combination steroid formulations focal were excluded. Clinical features were noted and hand-held dermoscopy was performed with both polarized and non-polarized modes. Spearman test to correlate clinical and dermoscopic features was performed. Informed consent and institutional ethical clearance was obtained.

Results

Females outnumbered males (2.8:1), with 74% belonging to age group 21-30 years. Clinical findings noted were Erythema (79%), telangiectasia (74.3%), and hypertrichosis (68.2%), significant other findings were acne, hypo pigmented macules, scaling and pustules. The most common dermoscopic findings seen were erythematous background (95%)(r-0.208), terminal hairs (87.4%)(r-0.435), vessels(polygonal, Y shaped, branched and linear) (87.1%)(r-0.654), white structure less areas (86.4%)(r-0.312), and

hypertrichosis (80.3%)(r-0.704). Dermoscopically vessels were seen in 30.4% of patients without telangiectasia visibly and white structure less areas in 20.6% of patients without any visible signs of atrophy.

Conclusion

Dermoscopy aids in early diagnosis of TSDF, also can assess for improvement before it is visibly apparent.

Limitations

There was no histopathological correlation done in our study.

Conflict of Interest

Nil