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**Multivariate analysis of factors associated with the koebner phenomenon in vitiligo: An observational study of 381 patients**

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**Background:** The Koebner phenomenon (KP) is a common entity observed in dermatological disorders. The reported incidence of KP in vitiligo varies widely.

**Aim:** To estimate the prevalence of KP in vitiligo patients and to establish different associations between KP and vitiligo characteristics.

**Methods:** A cross-sectional observational study was conducted using 381 vitiligo patients. Demographic and clinical information was obtained via the completion of Vitiligo European Task Force (VETF) questionnaires. Patients with positive history of KP were extracted from this vitiligo database. Multivariate analysis was performed to assess associations with KP.

**Result:** The median age of cases was 23 years (range=0.6-76). In total, 237 of the patients were male (62.2%). Vitiligo vulgaris was the most common type observed (152/381, 40%). 72% (274/381) patients did not exhibit KP, whereas 28.1% (107/381) of patients exhibited this condition. Age ( $p=0.019$ ), BSA% ( $p<0.001$ ) and disease duration ( $p=0.011$ ) were significantly increased in cases with KP compared with cases without KP. Family history of vitiligo, leukotrichia, halo nevi and premature grey hair were not significantly associated ( $p>0.05$ ) with KP. KP was more common in males 64/107 (59.8%,  $p=0.004$ ). Progressive disease (OR = 1.82, CI (1.17 – 2.92),  $p=0.041$ ), > 5 years disease duration (OR = 1.92, CI (1.22 – 2.11),  $p=0.003$ ) and BSA > 2% (OR = 2.20, CI (1.26 – 3.24),  $p<0.001$ ) were significantly associated with positive KP.

**Conclusion:** Our results suggest that KP may be used to evaluate disease activity and investigate different associations between the clinical profile and course of vitiligo. Future studies are needed to predict the relationship between KP and responsiveness to therapy.

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**Case report and bibliographical review - Jorge lobo's disease**

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Jorge Lobo's disease is a chronic cutaneous and subcutaneous granulomatous fungal infection caused by *Lacazia loboi*. It was first described by a Brazilian dermatologist named Jorge Lobo in 1931. Most human cases are restricted to tropical regions predominantly in the Amazon. Transmission seems to occur through traumatic inoculation of the fungus, consequently the lesions usually occur on the skin of the lower extremities exposed areas. In the present study, we report a case of an infected patient who is resident in the North of Mato Grosso, Brazil. In the literature review of Jorge Lobo's disease, we noticed that the clinical presentation is usually polymorphic, with the lesion initially imperceptible, altering over time in size, color and distribution. The diagnosis is made by mycological, clinical, pathological and immunohistochemical examination. So far, it has not been possible to isolate this fungus in culture which makes it difficult to understand the immunological aspects involved in the disease and makes it difficult to know the mechanisms that favor the spread of mycosis and how it occurs. The choice of treatment depends on the distribution of the lesions. A good therapeutic for small or isolated lesions has been surgical excision or cryotherapy treatment. In the present case, considering the extent of the lesion, pharmacological treatment with clofazimine and itraconazole was chosen. After observing the clinical course for about ten months, there was no significant improvement of the cutaneous lesions. For correct and early diagnosis and for the best treatment it is essential to know that this disease is increasingly common outside the tropics. The rarity associated with treatment failures based on extensive review of the literature disease motivated the research regarding the subject and the description of the assisted case.

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