

Introduction

Quarantine established in several countries by the new coronavirus pandemic, dramatically changed our lifestyle, affecting quality of life, skin, and psyche. (1,2) We described the skin diseases that initiated or were exacerbated in quarantine and assessed the impact on quality of life and the possible presence of anxiety.

Materials and Methods

We performed a descriptive study from April 2020 to August 2020, assessing two questionnaires: Dermatology Life Quality Index (DLQI) and Hospital Anxiety and Depression Scale (HADS-A) in a dermatological center. Variables analyzed were age, sex, onset or exacerbation of skin disease, DLQI and HADS-A scores. We used relative and absolute frequencies to describe patients. We collected data using Microsoft Excel and analyzed with SPSS.

References

- Rossi, R., Socci, V., Talevi, D., Mensi, S., Niolu, C., Pacitti, F., . . . Lorenzo, G. D. (2020). COVID-19 Pandemic and Lockdown Measures Impact on Mental Health Among the General Population in Italy. *Frontiers in Psychiatry, 11*. doi:10.3389/fpsy.2020.00790
- Kutlu, Ö, Güneş, R., Coerd, K., Metin, A., & Khachemoune, A. (2020). The effect of the “stay-at-home” policy on requests for dermatology outpatient clinic visits after the COVID -19 outbreak. *Dermatologic Therapy, 33*(4). doi:10.1111/dth.13581

Figure 1. Dermatoses most frequently exacerbated during the quarantine period

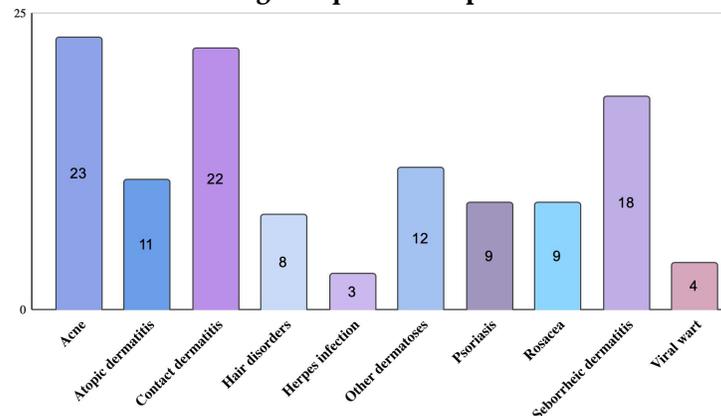
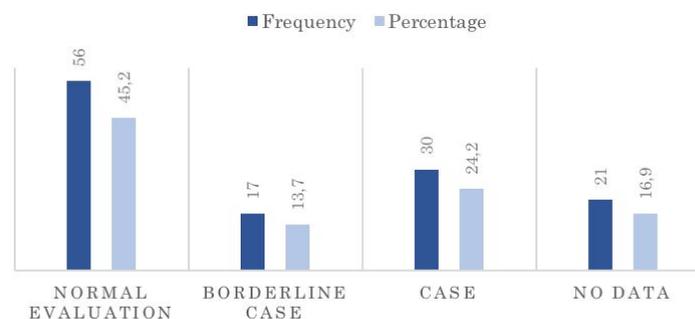


Figure 2. HADS - A index results in patient with onset or exacerbation of disease during quarantine period



Results

Of 124 patients, 85 (69%) were women. Acne was the most frequent dermatosis with 18,5% (n = 23), followed by contact dermatitis with 22 patients (17,7%). HADS-A results showed that 24,2% of patients had psychological distress. DLQI most frequent results had a small effect in life (29,8%; n = 37). Patients with psoriasis and eczematous diseases showed a major impact on their quality of life.

Conclusions

Quarantine has been related to exacerbation of pre-existent dermatological conditions and the onset of skin affections. Lifestyle changes influenced the occurrence of acne and contact dermatitis. DLQI and HADS results did not show an important impact in patients' quality of life. Further epidemiological studies are needed to determine whether there is a causal relationship between quarantine and these dermatological conditions.