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ABSTRACTS

A-Z APPLICATION FOR RUNNING A DERMATOLOGY CLINIC

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A-Z application was designed to comprehensively run a small business and specifically adapted for a small dermatology clinic. It is based on Microsoft Access programme which is a robust technology for designing sophisticated applications. Access provides the platform for relational database application; the database is maintained in tables which are connected to each other through the primary and foreign keys. The integrated front end is represented by forms and reports. The two most important forms in the application are the registration form and the clerking sheet. These vital reports are generated: individual bill, joint bill, medical reports etc.

A-Z application is designed to provide the clinic computerized aid for maintaining adequate clinical records of patients and for administrative tool to manage the clinic efficiently. The main functions of the application are:

- Storage of the clinical data of patients
- Generate medical bills, both individual and joint bills
- Generate medical reports based clinical data stored
- Automated production of unable certificate
- Maintain inventory of drugs
- Attachment of clinical pictures and documents to a clinical record if desired.
- The A-Z application can be adapted for many other functions required

PITYRIASIS AMIANTACEA AND OTHER PAPULOSQUAMOUS SCALP DISORDERS

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Pityriasis amiantacea (PA) is a papulosaquamous condition of the scalp, characterized by asbestos like thick scales attached to the hair shaft. It is thought to represent a reaction pattern to inflammatory skin disorders like psoriasis, seborrhoeic dermatitis, tinea capitis, atopic dermatitis and lichen planus, rather than a distinctive disease. The scaling may be localized or generalized, depending on the underlying condition and its duration.

This report highlights the clinical features of pityriasis amiantacea and the differential features of other papulosquamous scalp disorders. Scalp psoriasis and seborrhoeic dermatitis are the commonest causes of PA includes scalp fibrosis and permanent hair loss. These complications are the best avoided by prompt identification and treatment. The management modalities of PA will also be discussed.

VITILIGO: ANY DIFFERENCES IN ADULT AND CHILDHOOD CLINICAL CHARACTERISTICS

Anaba EL, George AO, Ogunbiyi AO.

Background: Vitiligo occurs in both Children and adults, average age of onset is before twenty years in at least half of adult cases and five years in children. In Nigeria, there are relatively few literatures specifically comparing clinical characteristic between adult and childhood vitiligo in order to identify any differences in our environment as elsewhere.

Aims and objectives: The objectives were to determine differences between childhood and adult vitiligo clinical characteristics (location, class of vitiligo, site of onset, gender, re-pigmentation, family history, etc.).

Methodology: This was a hospital based study. A record based review of clinical characteristics of one hundred and one vitiligo patients (111), who presented to the out-patient clinic with vitiligo in the preceding

five years (January 2005 - December 2009). Socio-demographic variables were assessed using a structures questionnaire.

Results: Prevalence of vitiligo was 6.5%. Of the 111 cases retrieved, 68.5% were adults and 31.5% were children. Significant differences between adult and childhood vitiligo include; preponderance of females in childhood vitiligo (34.3% males versus 65.7% females) and of males in adult vitiligo (57.9% males versus 42.1% females). Re-pigmentation of lesions following treatment was more in children (82.4% versus 56.7% in adults). Reported history of spread of lesions was 72.7% in children and 49.2% in adults. Commonest class of vitiligo is segmental in childhood study population (45.7%) and acrofacial in adults (36%). The vulva as area of onset was observed only in children.

MOLECULAR BASIS OF EPIDERMOLYSIS BULLOSA

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Over the past decade, there has been tremendous progress in understanding of the complex proteins and glycoproteins that contribute to maintaining keratinocyte adhesion via hemi-desmosomes and desmosomes as genetic basis of different forms of genodermatoses and autoimmune blistering skin diseases. Hemidesmosomes are the major adhesion units at the dermal-epidermal junction. Ultrastructurally, they are composed of electron dense inner and outer plaques that bind to keratin filaments and also connect to epidermal basement membrane via anchoring filaments, which in turn bind to the lamina densa and anchoring fibrils in the superficial papillary dermis.

Mutations in the genes encoding proteins associated with hemidesmosomes result in the group of inherited skin fragility disorders known as *epidermolysis bullosa*. *Epidermolysis bullosa* (EB), a heterogeneous group of mechanobullous disorders is characterized primarily by blistering and erosions of the skin and a variety of extracutaneous manifestations which include corneal erosions, enamel hypoplasia, scarring alopecia, erosions in the tracheal epithelium, development of esophagus strictures, congenital pyloric atresia, and late-onset muscular dystrophy, among others.

PROFILE OF AUTOIMMUNE CONNECTIVE TISSUE DISORDERS (ACTD) IN A DERMATOLOGY CLINIC IN LAGOS OVER A 9-YEAR PERIOD

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Background: The cardinal feature of autoimmune connective tissue disease is inflammation in the connective tissue which leads to dermatosclerosis, arthritis and abnormalities in other organs. In addition, antibodies are formed against normal tissues and cellular components and are therefore classed as autoimmune. The main connective tissue disorders present as a spectrum ranging from benign cutaneous variants to severe multisystem disease. These conditions pose diagnostic challenges. In this study we look at the frequency of autoimmune connective tissue disease.

Methodology: This was a retrospective study carried out between 2004 and 2011. Bio data and clinical diagnoses were obtained from the clinic register.

Results: A total of 16, 192 patients were seen and 224 (1.38%) of these presented with clinical features of ACTD. The male to female ratio was 3:1 with a male population of 56 (25%) and female population 168(75%. The mean age was 36.24 years (sd±2.3).

The following were the diagnoses made: Cutaneous LE 101 (45.3%), Scleroderma 42 (18.8%), Systemic Lupus Erythematosus 41 (18.4%), Rheumatoid Arthritis 12 (5.4%), Behcet's disease 7 (3.1%), Undetermined Connective Tissue Disease 12 (5.4%), Juvenille Rheumatoid arthritis 1 (0.4%) and Vasculitis 1 (0.4%).

Conclusion: Cutaneous LE is the most common presentation with Scleroderma and systemic Lupus Erythematosus contributing significantly to the number of ACTD presenting at the clinic. This study confirms dermatologic manifestations as an important pointer to autoimmune connective tissue disease and sometimes could be the only presentation.

VARICELLA IN A PREGNANT HIV/AIDS PATIENT: A CASE REPORT

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Background: Varicella infection in HIV/AIDS patients has been correlated with advanced immunosuppression. Co-existence in varicella in pregnant HIV-positive patients is rare.

Objective: The medical records of O.C., a 30-year old HIV-positive banker presenting with disseminated varicella in pregnancy together with review of relevant literature is presented.

Case Report: O.C., a 30-year old anti-retroviral naïve HIV-positive patient presented with a 3-day history of fever and a vesicular eruption that started after taking Duphaston on account of threatened abortion of a 15-week pregnancy. She is said to have had mild chicken-pox in childhood. The possibility of a vesicular drug eruption was entertained. Varicella IgM was positive and patient had a course of oral acyclovir. Within 5 days, most of the lesions had cleared and patient was discharged in good condition.

Conclusion: Pregnancy may further depress immunity in HIV/AIDS patient and predispose them to varicella.

A ONE YEAR REVIEW OF GENERALISED PRURITUS AT THE DERMATOLOGY CLINIC OF THE LAGOS UNIVERSITY TEACHING HOSPITAL (LUTH)

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INTRODUCTION: Pruritus is a specialized, poorly localized, usually unpleasant sensation that compels the desire to scratch. It could be localised or generalized, sometimes associated with parasitoses, systemic disease, or simply idiopathic, and can significantly affect the patient's quality of life.

OBJECTIVES: This study was carried out to document the aetiology and clinical pattern of pruritus at the Dermatology outpatient clinic of LUTH over a one year period.

METHODS: This was a retrospective study, in which data from the case records of all patients who presented with pruritus between January and December 2010 was reviewed and relevant information imputed in a formatted questionnaire. Data was analysed using the SPSS 19 packages.

RESULTS: A total of 2480 patients were seen in the dermatology outpatient clinic during this period. A total of 42 (1.7%) patients presented with generalized pruritus. There were 14 (33.3%) males and 28 (66.7%) females (66.7%). 3 (7.2%) of the patients had associated systemic illnesses 2 (4.8%) with chronic kidney disease and 1 (2.4%) with peptic ulcer disease). 30 (71.4%) of the patients had their symptoms for at least 6 months before presentation; 6 (14.3%) of the patients reported worsening of symptoms at night and 2 (4.8%) people reported the pruritus was severe enough to affect their quality of life.

CONCLUSION: Generalized pruritus though not common in this study can severely affect the quality of life in patients and poses a diagnostic and therapeutic challenge to the dermatologist. In this study most of the patients had no cause found and this was attributed to lack of thorough investigations. It is important for patients to be thoroughly investigated for the aetiology of pruritus before it can be labeled idiopathic. In our setting there are limitations due to financial constraints associated with extensive investigations.

KELOID PRESENTATION IN A TERTIARY HEALTH FACILITY: A RETROSPECTIVE STUDY OF 5 YEARS

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INTRODUCTION: A Keloid is a benign firm swelling arising from overgrowth of fibrous tissue following skin damage are usually seen in predisposed individuals and the pattern of inheritance observed is consistent with autosomal dominant mode variable expression. Although some epidemiological studies have shown that more Keloid patients are female, other studies show equal incidence of Keloids in male and female subject.

METHODOLOGY: This is retrospective study over a five year period (between January 2003 and December 2008) of patients presenting in a skin clinic with diagnosis of keloids at OAUTHC, Ile-Ife. The case files of identified patients were retrieved from the hospital records. A total of 77 cases were retrieved. Their bio-data, site of keloid, presenting symptoms and treatment were noted.

RESULTS: There were 77 patients over the period of 5 years. There were 50 females (65%) and 27 male patients (35%). The greatest age range involved was 20-29 years accounting for 35% of cases. There were 106 sites affected because some patients had multiple site affectation is the anterior chest wall 26 out of 77 patients followed by head and neck 21 out of 77. The least affected area was the pelvis 3 out of 77.

CONCLUSION: Keloidal scars affect both sexes affecting more females in this series probably because females may be more exposed to beautification scars. Anterior chest wall continues to be a predilection site. Preventive measure may be helpful in keloid prone individuals. Effective treatment options for keloidal scars need to be made available.

CHALLENGES OF DERMATOLOGY TRAINING AMONG INTERNAL MEDICINE RESIDENT DOCTORS IN NIGERIA

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Background: Dermatology training in Nigeria remains inadequate. Some Colleges of Medicine do not have lecturers trained in Dermatology. Although the number of dermatologists in the country has increased, they are still inadequate compared to specialists in other areas of internal medicine.

Objective: The objective of the study was to determine the perceived challenges by residents with regard to dermatology training currently in Nigeria.

Methods: This was a cross-sectional descriptive study among resident doctors in internal medicine attending the update course of the National Postgraduate Medical College in Lagos. Data was analkysed with SPSS 16.

Result: Ninety resident doctors answered the questionnaire, seventy-two (80.9%) had at least one dermatologist in their training institution. Sixty-seven (76.1%) had done posting in dermatology (6.1% for one month, 16.7% for two months, 68.2% for three months and 9.1% for more than three months). Sixty (66.7%) did dermatology posting in medical school (30.0% for two weeks, 23.3% for four weeks and 41.7% for more than four weeks).

Majority of the respondents had less than 30% exposure to the various fields of dermatology such as wound/ulcer care and Dermatopathology which they considered very relevant to dermatology training at post graduate level. Poor research opportunity/support (55.9%), inadequate mentors/carrier counselors (53.2%), inadequate support via peer teaching (50.7%) and inadequate facilities (53.2%) were major challenges to dermatology training.

Conclusion: There is need to standardize Dermatology training in Nigeria. A significant number of the doctors had inadequate exposure to dermatology as medical students. There is a need to ensure the curriculum for training under graduate and postgraduate students in dermatology is adhered to research opportunities should be highlighted and adequate funding of dermatology departments to ensure adequate exposure to all fields of dermatology training by residents.

PROTEUS SYNDROME A RARE CONDITION IN AN 11 YEAR OLD NIGERIAN GIRL

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Proteus Syndrome is a rare disorder characterized by overgrowth of skin, connective tissue, brain and other tissues. [1]It is a harmatomatous condition which occurs sporadically and it is associated with asymmetric plurifocal hypertrophy (partial or regional) commonly involving bone. This gives rise to the "Elephant Man" picture which made the disease famous after its depiction in a movie of the same name. [2]The disability that results from macrodactyly, scoliosis and joint instability with expansive subcutaneous tumors contribute to the 20% mortality figure that is reported in Proteus syndrome. [3]There is however a higher morbidity which results from the mental retardation and social isolation that sufferers of the syndrome experience.

Of the few hundreds of people noted to have the disease worldwide, more males than females are affected. No racial predilection has been noted and the presentation is usually in childhood, or at adolescence.

We report a case of Proteus Syndrome in an 11 year old Nigerian that has right lower limb hemi-hypertrophy, epidermal nevus and cardiomegaly demonstrable by echocardiogram but is otherwise well with no affectation of mental or cognitive function which is not typical of most reported cases.

HUGE PYOGENIC GRANULOMA IN THE BEARD AREA

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Pyogenic granuloma, whose other synonyms are lobular capillary hemangioma, granuloma pyogenicum, granulation tissue type hemangioma, is a common benign rapidly developing vascular lesion of the skin and mucosa usually preceded by minor trauma. This clinical condition was first described in 1897 by two (2) French surgeons - Ponchet and Dor which indirectly corroborates surgical excision as one of

the treatment modalities. Pyogenic granuloma can occur at any age, with equal sex distribution though there has been documented increase during pregnancy.

The name is a misnomer as it suggests an infective etiology but the accepted theory is a hyperplastic neovascular response to an antigenic stimulus with the trigger more frequently being a traumatic injury. Exposure to drugs such as retinoids, cyclosporine, 5-flourouracil, HIV protease inhibitors, etc, has also been theorized to trigger the lesion.

This case presentation brings out the rapid nature of evolution of this lesion which could follow a mild trauma from routine shaving. We present a case of a 28 year old national youth corper with a four week history of picking at an erythematous popular eruption in the left jaw area following shaving (shaver's bump). The popular grew rapidly over the weeks prior to his presentation and did not respond positively to local personal attempts by the patient to puncture the lesion. Excision biopsy carried out revealed numerous capillaries and venules with endothelial cells arrayed radially towards the skin surface. This is pathognomic of the lesions.

PEMPHIGUS ERYTHEMATOSUS: A CASE REPORT IN A YOUNG FEMALE NIGERIAN

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INTRODUCTION: Pemphigus Erythematosus also known as Senear-Usher Syndrome is an overlap syndrome with features of Lupus Erythematosus and Pemphigus foliaceus.

METHOD CASE REPORT: We report a 20 year old female undergraduate that presented with symptoms of Nephrotic Syndrome and skin rashes which further investigations proved to be Pemphigus Erythenatosus.

CONCLUSION: Cutaneous auto-immune diseases though rarely reported are present and can be diagnosed if there's a high index of suspicion.

A CASE OF OLFACTORY REFERENCE SYNDROME

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There are several unique psychiatric disorders that are likely to present to a Dermatologist because of their accompanying skin complaints. These conditions are referred to as Psychocutaneous disorders.

Olfactory Reference Syndrome (ORS) is a preoccupation with an imagined body odour leading to the stigmata of shame, embarrassment and social isolation. It is considered by many to be a sub-type of body dysmorphic disorder (BDD). ORS has obsessive-compulsive features that are quite similar to both obsessive compulsive disorder (OCD) and BDD. Descriptions of this syndrome have been in existence as far back as 1800's. These patients pose a challenge to dermatologists and the best treatment options are centred on psychotropic medications and psychotherapy; thus management should be muli-disciplinary including dermatologists and psychiatrists. Even though ORS is relatively uncommon, it is still seen with relative frequency in dermatology practice. These individuals require behavior therapy designed to retrain them to enter society and face their fears. It is hoped that this case report will bring to the fore the clinical features, the need to ensure an accurate diagnosis of ORS and institute the best line of management with a multidisciplinary approach.

PIEBALDISM WITH CHARACTERISTIC SKIN LESIONS: A CASE REPORT

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We report a case of neonate with characteristics sign of Piebaldism.

A four week old boy was referred to our department following history of white patches on the face, trunk, upper and lower extremities. These patches and two central areas of white hair were noticed two days after birth, for about four weeks now lesions have remained unchanged. There was no known family history of similar lesions or white hair patch.

Diagnosis was made clinically. Other clinical and investigation results showed no abnormality. Parents were counseled on nature of the disorder and the need for sun screening. Piebaldism with these characteristic skin patches is not commonly seen.

There is a need to make available treatment modalities like melanocyte transplantation in our environment for such depigmented lesions.

SOAP INDUCED SKIN MORBIDITY AMONG NIGERIAN DERMATOLOGY PATIENTS

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The irritant potential of soap has long been known but the use of this information in the management of skin disorders is not sufficiently emphasized. A hot humid tropical environment encourages bathing at least once daily and in some cases 2-3 times daily. The strongly alkaline pH of soaps against the acidic pH of the skin causes a rise in skin pH which depletes the natural skin lubricants, drying the skin and stimulating the itch process. A dry skin is more porous to environmental irritants. A high pH also alters the skin flora encouraging proliferation of pathogenic microbes.

This study set out to assess the contribution of soap to skin morbidity in skin patients. 5600 referrals to the skin clinic at a teaching hospital in Nigeria, over a 4 year period, were advised to change their alkaline skin cleansers to one of two proprietary pH balanced skin cleansers, during the waiting period to see the Dermatologist a period of between 4 weeks and 12 weeks. One of the skin cleansers was pH7 whilst the other was pH5.5. During this waiting period, data collected included demography, disease history, and basic skin and clinical examination as well as preliminary investigations comprising haematocrit, urinalysis, blood glucose, HIV status and VDRL.

Result: 85percent of patients complied with the advice. Of these, 65% of patients (55% total clinic attendance) had their complaints sufficiently resolved, requiring no further consultation. 30% observed significant improvement in their skin condition.) .05% reacted to the acidic alternative but none to the neutral cleanser. However patients reported more dramatic improvement in their skin with the acidic cleanser. The complaints that resolved completely were the acquired xerodermas and the pruritic skin lesions. The inflammatory dermatoses were significantly improved. Whilst this was no cure for the infective dermatoses, symptoms were significantly relieved.

Conclusion: Use of alkaline soap for body cleansing imparts significant skin morbidity. Syndet based neutral or mildly acidic skin cleansers significantly reduces this morbidity and should be the first option in the management oaf acquired skin conditions.

DELAYED DIAGNOSIS OF EPIDERMOLYSIS BULLOSA SIMPLEX IN A 2 YEAR OLD NIGERIAN BOY

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Background: Epidermolysis bullosa is a rare hereditary mechanobullous skin condition characterized by induced epidermal blistering. The effects of this condition impacts greatly on the child, caregivers and health facilities. In our environment where there are many causes of infective bullous lesins, impetigo is a strong differential that can lead to delay in diagnosis and management of this condition.

Aim: To emphasis that when blistering lesions become recalcitrant, epidermolysis bullosa should be considered.

Case Report: A case report of a 22 month old boy with a history of recurrent blisters in the neck and upper trunk from 6 months of age for which he was managed severally for impetigo in different health facilities.

Diagnosis: A histological diagnosis of epidermolysis bullosa was made following skin biopsy.

Conclusion: This case reiterates that when treating recalcitrant bullous lesions in a child, epidermoilysis bullosa should be considered though rare in this environment.

ECZEMA CLASSIFICATION TYPES IN SKIN CLINIC POPULATION

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INTRODUCTION: Eczema is a skin disease group that encompasses a number of forms of dermatitis, broadly classified into endogenous and exogenous groups. There have been controversies trailing eczema as an entity and as a nomenclature for a long time in literature. Although there are standard criteria to classify eczema in literature, classification of the underlying diseases has been haphazard and unsystematic, with many synonyms used sometimes to describe the same condition.

METHODS: 117 cases of eczemas were seen at two

clinics sites in the same geographical location over the same time period. Classification of the eczemas was clinical as well as use of standard criteria found in literature.

RESULTS: There were ten classified groups of eczemas documented in this study. All forms of eczema accounted for 25% of the total dermatological diagnosis during this period. 25% of the eczema found in this series was classified atopic eczema. Atopic and Seborrheic eczemas were the two leading eczema presentations accounting for 41% of all the classified forms of eczemas. Other forms of eczemas documented were Contact (9%), lichen simplex chronicus (9%), cosmetic dermatitis (9%), hand and foot eczemas (8%), statis eczema, Exfoliative dermatitis (5%), Interriginous exczema (3%) and nipple eczema (2%).

CONCLUSION: Eczemas still account for a significant proportion of dermatological diagnosis. There is need for proper classification using standard guidelines for accurate diagnosis, treatment and research. Dermatologists globally need to use the entity 'eczema' uniformly in identity and classification in order to apply standard treatment guidelines correctly. Validating standard classification protocols for use in hot humid climate of the developing world where infection can colour presentation is suggested.

ADVERSE CUTANEOUS DRUG REACTIONS FROM THE USE OF HERBAL TOOTHPASTE

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BACKGROUND: Adverse cutaneous drug reactions occur and go unr ecognized and under reported. Fixed drug eruption (FDE) is one of such cutaneous disorders. Herbal products in various forms are not necessarily all organic and are components of several cosmetics and medicinal products currently being used and are increasingly becoming popular.

OBJECTIVE: To document the prevalence and clinical pattern of cutaneous drug reactions to herbal toothpaste and make recommendations to the appropriate regulatory bodies.

METHODOLOGY: This was a retrospective study carried out between June 2010 and April 2012 looking at case notes of all patients who had a diagnosis of FDE. Demographic and clinical data were extracted including; age, sex, presenting complaint, duration of complaint and description of skin lesions.

RESULTS: A total oaf 476 patients were seen between June 2010 and April 2012. During this period 95 (1.99%) patients presented with FDE and 16 (16.84%) were noted to use herbal toothpaste. There were 13 (81.25%) female and 3(18.75%) male patients; age range was 26-49 years. They had the following presenting complaints: tingling in the mouth, numbness of the tongue, hyper pigmentation of the mouth, lips, chin and/0r bucacal mucosa. The duration of their complaints was from 6 weeks-8 months.

CONCLUSION: Adverse cutaneous drug reactions occur from the use of herbal toothpaste. This report can help in identifying potential product associated risks and lead to further studies on pharmacology of herbal product in cosmetic and medicinal use. Post marketing surveillance is vital and pharmaco-vigilance units must be active.

A CASE REPORT ON CREST SYNDROME IN A MIDDLE-AGED AFRICAN WOMAN

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BACKGROUND/AIM: CREST Syndrome a synonym for Calcinosis cutis, Raynauds phenomenon, esophageal dysmotility, sclerodactyly, and telangectasia, is under-diagnosed in Nigeria. Epidemiologically, African and Hispanic patients have a higher incidence of CREST, but due possibly, to low index of suspicion and lack of diagnostic equipment, frequently missed. This case report shows cases of late presentation and misdiagnosis.

CLINCAL SUMMARY: A 50 year old Chief Nursing Officer presented with progressive dyspnoea on exertion, dry intermittent cough, painful extremities precipitated by cold weather of one year.

Examination revealed telengectasia of extremities with hypoxemia in room air. She presented at peripheral

hospitals and was treated for lobar pneumonia and investigated for pulmonary tuberculosis prior referral to an Indian hospital.

INVESTIGATION: A left heart cardiac catheterisation was normal, 2D echo which showed gross right atrial and right ventricular dilatation with severe pulmonary arterial hypertension which lead to screening for anti-nuclear antibodies. She was discovered to have anti-centromere antibodies 3+.

RESULTS: She was commenced vasodilators for the pulmonary arterial hypertension and steroids. She was commenced on Warfarin as prophylaxis against intracardiac thrombosis.

CONCLUSION: The index case presented with features of connective tissue disease, and complications with a delay in diagnosis.

GIANT CONDYLOMATA ACUMINATA (BUSCHKE-LOWENSTEIN TUMOUR) IN AN ELDERLY NIGERIAN MAN

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Background: Buschke-Lowenstein tumor is a slow-growing, locally destructive verrucous plaque that typically appears on the penis but may occur elsewhere in the anogenital region. It most commonly is considered to be a regional variant of verrucous carcinoma and a rare complication of condylomata acuminate. The few reported cases were in association with immunosuppression. The treatment outcome is poor in this condition. Prevention by early treatment of perineal warts is advised.

Objective: To report a case of Buscke-Lowenstein tumor, a rare complication of condylomata acuminate in a healthy elderly man, with delayed diagnosis after 10 years initial perineal warts.

Method: A 65 year old man presented to the dermatology clinic with a 10 year complaint of multiple growth around the perineum which started enlarging with associated pain and foul smelling discharge 2 years prior to presentation.

Examination revealed large, multiple, tender, pedunculated, flesh colored, cauliflower masses with foul smelling serosanguenous discharge around the groin and extending to the thighs and buttocks.

The inguinal lymph nodes were significantly enlarged.

Histology result of an incision biopsy of one of the masses was consistent with condylomata acuminate.

Conclusion: Buschke-Lowenstein tumor is a rare complication of condylomata acuminate. It rarely metastases but is locally very invasive and destructive, with fatality from exsanguinations if femoral artery is invaded.

SKIN TUMORS AT LAGOS UNIVERSITY TEACHING HOSPITAL, NIGERIA

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Introduction: Skin cancer is the most common malignancy among the Caucasians and noted to be rare in the Africans and the negroid skin. Because of the rarity of skin cancers in Africans, the diagnosis is often delayed with consequent advanced presentation and poor prognosis. Apart from ultraviolet radiation, other predisposing factors to skin in the African skin are immune suppression (HIV, post transplantation) and oncogenic viruses.

Aim: This is to document the frequency of skin tumors both benign and malignant lesions from the review of 7 year records (January 2001 to December 2007) of histology reports of all skin samples seen at the pathology department of the Lagos University Teaching Hospital.

Methods and materials: Reports of all skin samples seen at the morbid anatomy (Pathology) Department between January 2001 and December 2008 were reviewed. The frequencies of various skin tumors (both benign and malignant) were determined and the result displayed using frequency tables.

Results: Skin tumors represented 19.8% of all reports made on skin samples during the study period. One hundred and twenty one patients samples (13.6%) were benign tumors while 55 (6.2%) were malignant tumors. There is a female preponderance for both malignant and benign tumors with a male to female ration of 1:1:32. Squamous cell carcinoma (SCC) was the commonest malignant tumor followed by malignant melanoma. Kaposi's sarcoma and dermato-

fibrosarcoma protuberance. Cutaneous papiloma was the commonest benign tumor in the study.

Conclusion: All types of skin tumors, whether benign or malignant can be found in Africans, hence there is a need for more vigilance in order to diagnose them early.

SUCCESSFUL INTRAMATRIX STEROID INJECTIONS FOR DESTRUCTIVE NAIL LESIONS: REPORT OF TWO CASES

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Destructive inflammatory nail lesions often impair so much on the quality of life and a cause of cosmetic embarrassment. Oral and topical steroids are often used but side effects such as leakage of topical steroids and the systemic effects of the oral are often encountered, most times, the lesions are recalcitrant and treatments are often unsuccessful prompting the intramatrix injections to be done. However this procedure is often rarely done.

We present two cases with successful outcomes following four weekly intramatrix injections with optimal result at the third months. Side effects were minimal.

Conclusion: Intramatix injection might be successful though in all cases curing to recalcitrant inflammatory destructive lesions of the nails especially Lichen plants, embarking on the procedure will improve the quality of life in these patients.

HORMONE INDUCING KELOIDS IN NON PREDISPOSED PATIENTS: THE NEED FOR REVIEW OF CONVENTIONAL APPROACH TO ITS MANAGEMENT & A CASE OF LATE KELOID-ENDOCRINE INTERACTION

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Keloid in the dark skin, strong family history individuals in the adolescents/young adult age are not unexpected but when late onset keloid are appearing in patients that are not predisposed to it following co existing hormone producing medical conditions then it call for review of conventional regimen considering the fact that these variants are resistant. We describe three cases of a late onset keloid in non predisposed individuals and the need to address the conditions and developed a holistic approach to the management of this keloid endocrine interaction.

FAMILIAL CLUSTERING OF VITILIGO: A CASE REPORT

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We report a 3 year old pupil with one year history of white patches on both feet. There were similar patches with the same distribution noticed in the mother two months earlier.

There was no history of application of any topical agents prior to onset or history suggestive of any autoimmune diseases.

The diagnosis of Vitiligo was made on clinical ground.

We conclude that despite the extensive discussion on the theories of the possible aetiology of vitiligo, familial theory should be given more attention during clinical evaluation of patient with vitiligo.

MODIFIED JASON'S PROCEDURES FOR IN-GROWING NAILS: A CASE REPORT OF SUCCESSFUL TREATMENT THAT IS YET TO RE-OCCUR

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In-growing Toe nail is a painful and morbid condition that also impaired on quality of life of patients. More than 10 procedures can be used in treatment but recurrence has always been the rule though success rate also varies in them. Wedge re-section using Jason's procedure tend to help to give a fast granulation tissue de bulking while partial matrix phenolization (chemical matrixectomy appeared to ablate or atrophy the matrix on the affected side as well as act as antiseptic.

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We describe a case of a Cameroonian woman who was treated using modified Jason's procedure (combination of wedge reaction and partial matrix phenolization) has had three recurrent on previous attempt but is yet to recur after this procedure.

Conclusion: Modified Jason's procedure is a realizable procedure in a recalcitrant in growing nails.

SUCCESSFUL TREATMENT OF ADVANCE STAGE MYCOSIS FUNGOIDES WITH CONVENTIONAL CHEMOTHERAPY - A CASE REPORT

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Cutaneous T-cell lymphoma (CTCL) accounts for two-thirds of cases of primary cutaneous lymphoma. Most variants of CTCL are indolent lymphoma, the most common being mycosis fungoides. Current management of MF use a "stage-based" approach aimed at improving symptoms and cosmesis. Conventional chemotherapies are limited by toxicity or the lack of consistently durable responses, and only a few treatments have been shown to actually alter survival. In fact aggressive chemotherapy has not been shown to improve overall survival, but instead they increase the risk of immunosuppressive complications, especially in the late stages of disease. We present a case of a 56 year old man with advanced Mycosis Fungoides - Tumour stage that responded to conventional chemotherapy.

WOLFING LUPUS VULGARIS IN AN ALMAJIRI IN ZARIA (STREET), URCHIN: A CASE REPORT IN ZARIA

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One of the variants of cutaneous tuberculosis is lupus vulgaris though the extensive scaring variant has been rarely reported, a 15 years old street urchin in Zaria was recently diagnosed with this wolfing variant. Treatment was commenced with lesion regression but the scar remained.

There is still need to watch out for these variant in the neglected people in the society and to commence early intervention to avert extensive scarring and cosmetic disfigured patients.