How do skin diseases affect the family QoL?

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Abstract:

Background: Quality of life (QoL) of individuals is closely related to the QoL of those around them such as partners that may be more impaired than that of the patient.

Objective: The aim of this study was to identify the impact of skin diseases on the QoL of the patients’ household family members.

Patients and methods: One hundred adult family members of patients with different skin conditions were included in this study. The participants were divided into two disease category groups: inflammatory group (family members of patients with inflammatory skin diseases) and noninflammatory group (family members with patients with noninflammatory diseases or isolated lesions). Then, the family dermatology life quality index scores between the two disease categories were compared. Each group was analyzed to examine the relationship between different diseases. Each group was analyzed to examine the relationship between different diseases in terms of their impact on family quality of life.

Results: The impact of skin diseases on family members who live in urban areas was significantly higher than those living in rural areas. The impact of inflammatory skin diseases on family members was highly significant (p<0.001) than that of noninflammatory ones.

Conclusion: This study had shown that caregivers to patients with skin diseases not only had to cope with the effect of the patients’ disease, but also with other individual items of quality of life. The family dermatology quality index seems to be a useful tool to evaluate the burden of a skin disease on family caregivers and has been shown to be statistically reliable and valid.
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**Objective:** The aim of this study was to identify the impact of skin diseases on the QoL of the patients’ household family members. One hundred adult family members of patients with different skin conditions were included in this study. The participants were divided into two disease category groups: inflammatory group (family members of patients with inflammatory skin diseases) and noninflammatory group (family members with patients with noninflammatory diseases or isolated lesions). Then, the family dermatology life quality index scores between the two disease categories were compared. Each group was analyzed to examine the relationship between different diseases. Each group was analyzed to examine the relationship between different diseases in terms of their impact on family quality of life. The impact of skin diseases on family members who live in urban areas was significantly higher than those living in rural areas. The impact of inflammatory skin diseases on family members was highly significant (p<0.001) than that of noninflammatory ones. This study had shown that caregivers to patients with skin diseases not only had to cope with the effect of the patients’ disease, but also with other individual items of quality of life. The family dermatology quality index seems to be a useful tool to evaluate the burden of a skin disease on family caregivers and has been shown to be statistically reliable and valid.