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INTRODUCTION

Rosacea is a frequent condition accounting for 2 to 3% of consultations, that occurs more often after the age of 45, and is more prevalent in women. The psychological and relational discomfort, the aesthetic prejudice, and the pejorative connotation that a "red" face confers justify the request for medical treatment of the disease.

MATERIAL & METHODS

Population-based study using a representative sample of the general population aged ≥18 years from six countries (Canada, China, Italy, Spain, Germany and France). All participants were asked to fill in a digital structured questionnaire. We inquired about the presence of skin disease their eventual localization

RESULTS

A total of 13,138 adult participants responded to the questionnaire (2,011 Canadian, 3,050 Chinese, 2,000 French, 2,000 Italian, 2,040 Spanish and 2,037 German). Among these participants, 26.2% (n=3,450) suffering from skin diseases, including, rosacea (3.36%; n=442). We isolated 166 individuals who did report exclusive rosacea, over the last 12 months. Fifty-eight percent were women; the average age was 49.4±14.8.

The 2 most frequently reported locations were the cheeks (62%) and the nose (34%), and 5% reported a location on the eyelids. A total of 18.8%, 12.6%, 11.9%, 19%, 13.9% and 12.3% stated that their facial injury was a handicap in their professional life, emotional life, family life, social relations, leisure time and sporting activities, respectively.

Nineteen percent think that their personal life would have been different in the absence of their face injury (21.7% for their professional life).

Thirty-seven percent said that they had tried to hide the condition, and 28 % of patients reported using corrective make-up [women 41% vs men 8%]

Eight percent considered their sex life to be affected, and 10% believed that the condition caused difficulties in their relationship. Thirty-five percent admitted to having difficulties sleeping, and 34% reported being tired. In terms of stigma, 21% of people with rosacea felt rejected, 23% felt looked upon with disgust, and 35% expressed a feeling of discouragement.

While the average DLQI and Face-Impact scores were 4.1±5.3 and 15.3±21.7, respectively, they increased to 11.3±5.2 and 47.9±17.1 when the subject felt disgusted and to 11.2±5.2 and 47.9±18.4 when the subject felt rejected.

54.8 percent reported consulting a health professional (61.2% a dermatologist, 28.4% a GP, and 8% a pharmacist).

DISCUSSION

Our study shows in a sufficiently robust group [which allowed the identification of patients with only rosacea] that the impact in terms of quality of life and daily burden is far from negligible. The impact on quality of life is strongly linked to the experience of each patient. The use of alternative and complementary medicine by one in three subjects indicates the need for better management of patients suffering from rosacea. It is likely that there are patient needs unmet with conventional treatments or that patients are not fully aware of the therapeutic possibilities.

