SUMMARY BACKGROUND.

The skin is the largest organ in the human body and it undergoes significant changes during pregnancy just like other systems such as endocrine, immune, metabolic and vascular systems. These pregnancy associated skin changes are neglected aspect of obstetric care despite the skin being of great cosmetic concern to the pregnant woman.

These skin changes could be physiological or pathological. Pregnancy associated skin changes has been broadly classify into three which are; Physiological, Some dermatoses affected by pregnancy and Pregnancy specific dermatoses. While physiological skin changes cause cosmetic anxiety to the pregnant women, some of the pregnancy specific dermatoses can pose risk to the unborn baby and the mother. The pathogenesis of these skin changes has been attributed to physical factors, genetic factors and rise in levels of ovarian, placental and pituitary hormones during pregnancy. Documenting the prevalence and pattern of pregnancy associated skin changes in this environment was the subject of this research.

AIMS AND OBJECTIVES

The specific objectives are to determine the prevalence of skin changes among primigravidae, to document the clinical pattern of the skin changes and to correlate the documented skin changes with gestational age.

METHODODOLOGY
The study was a descriptive cross-sectional observational study. Study location was the Department of Obstetrics and Gynaecology, Obafemi Awolowo University Teaching Hospitals Complex (OAUTHC), Ile-Ife. Clearance was obtained from Ethics and Research Committee before the patients were recruited. Patients were selected consecutively after informed consent had been obtained. Two hundred and forty subjects and 240 controls were appropriately recruited into the study. A structured questionnaire was used to collect essential information from each participant. Physical examination of the skin, hair and nail was done in a well lit room and with magnify lens where necessary.

RESULTS

The mean ages of the participants were 27.53±3.88 years for subjects and 27.50±4.1 years for controls. The prevalence of pregnancy associated skin changes varied between trimesters and increased as pregnancy advanced. The general prevalence in this study were 88.3% (n=212) in the first trimester, 98.3% (n=236) each in the second and third trimesters compared to 47.5% (n=114) in controls. In some pregnant women, more than one type of skin changes were seen.

Physiological skin changes ranked highest with a prevalence of 77.1% (n=185) in the first trimester, 95.0% (n=228) in the second trimester and 94.6% (n=227) in the third trimester while only 44.6% (n=107) of similar skin changes were seen in controls. Pigmentary changes were the commonest physiological changes noticed in this study and mucous membrane changes was the least with a prevalence of 1.3% (n=3) in the first trimester, 2.1% (n=5) in second trimester and 1.7% (n=4) in third trimester. Other physiological skin changes seen in this study were glandular, nail, connective tissue, hair and vascular. Other dermatoses affected by pregnancy such as atopic dermatitis, vaginal candidiasis, pityriasis versicolor, skin tag, pruritus) were seen in 33.3% (n=80), 36.7% (n=88) and 50.4% (n=121) in first, second and third trimesters respectively. No case of
pregnancy specific dermatoses (such as atopic eruption of pregnancy, polymorphic eruption of pregnancy, pemphigoid gestationis and intrahepatic cholestasis of pregnancy) was seen in the course of the study supporting the rarity of the disease as documented in previous studies.\textsuperscript{108, 112}

Among the possible determinants of presence of skin changes in pregnancy were hormonal (pituitary, ovarian, placental) factors, genetic factors, environmental factor, gestational age, and skin colours.

CONCLUSION

The high prevalence rate of skin changes in pregnancy documented in this study especially physiological skin changes is therefore consistent with the findings by other workers from the other parts of the world.\textsuperscript{16, 17} Some of these skin changes were statistically significant with increasing gestational age.