Title summarizes abstract

Seborrheic Dermatitis in Patients with Acquired Immunodeficiency Syndrome.

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Introduction outlines the clinical problem

Introduction: Several skin conditions are known to be associated with the acquired immune deficiency syndrome (AIDS). Our clinical observations suggested the hypothesis that seborrheic dermatitis is an under-recognized but common skin manifestation of AIDS that has important, short-term prognostic significance.

Define abbreviations

Introduction ends with hypothesis or statement of purpose

Methods describes study design, setting, sample and control selection, outcome measures, and statistical analysis

Methods: All patients with AIDS seen at the Henry Ford Hospital, an urban hospital, during a one-year period were enrolled in a cohort study. Each patient underwent a comprehensive skin examination. All skin conditions were noted, and the severity of seborrheic dermatitis was graded. A group of sex and aged matched patients seen during the same time period served as a control group. In the second part of the study, AIDS or HIV patients with the most severe grades of seborrheic dermatitis were compared to patients with mild or no seborrheic dermatitis for short term mortality. Comparisons were analyzed with chi-square and relative risk calculations.

Statistical analysis is described

Results begin with a description of the study sample, controls and exclusions

Results: Eighteen patients with AIDS and 12 patients with HIV infection were enrolled (29 males, 1 female). Thirty age and sex matched controls were randomly selected from the patient roster. The most common risk factors for the cases were homosexuality and IV drug abuse. Eighty percent (15/18) of AIDS- and 42% (5/12) of HIV-infected patients had seborrheic dermatitis compared 10% (3/10) of controls (P <0.001 AIDS vs. controls, P =0.07 for HIV patients vs. controls, and P = 0.01 for AIDS- vs. HIV-infected). The severity of seborrheic dermatitis seemed to be associated with short-term prognosis. Of the 6 patients who died during the study, 3 developed severe seborrheic dermatitis within six months and 2 developed moderate seborrheic dermatitis within a year of their deaths (relative risk = 2.5, 95% CI = 1.9–3.3). Of the 5 HIV-infected patients with seborrheic dermatitis, 2 with moderate grade progressed to AIDS and one subsequently died during the study period.

List frequencies of the most common outcomes

Describe comparisons of outcomes between groups

Summarize conclusions and implications of study

Conclusion: There is a significant increase in seborrheic dermatitis in patients with AIDS, and the severity of seborrheic dermatitis may have short-term prognostic significance.

Abstract fits inside the box