FOX-FORDYCYE DISEASE

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Fox-Fordyce disease is a rare chronic skin disorder that presents with intense itching and irritation, especially in the underarms, pubic area, and around the nipples. Common areas where apocrine glands are located. Individuals have a characteristic presentation of multiple, small, raised itchy bumps that can become dry and hyperpigmented (darken in color) around the hair follicles on the skin. This condition commonly affects adolescent and premenopausal adult women between the ages of 13 and 35 years old. Although, it can also affect men, children, and postmenopausal women.

The exact cause of Fox-Fordyce disease is unknown. Researchers have suggested theories in which the obstruction of the apocrine glands and the associated inflammation plays a role in the development of the condition. That there could be a hormonal or genetic component contributing to this condition. There is still a need for more research to aid in determining the exact of this condition. Diagnosis of Fox-Fordyce disease is usually made through clinical physical examination of the lesions and detailed patient history. Though a skin biopsy can be taken to confirm the diagnosis for atypical presentations of the condition. Fox-Fordyce disease may often be confused with other diseases such as folliculitis, pseudo folliculitis, or miliaria rubra, leading to patients to receiving a misdiagnoses.

The signs and symptoms of Fox-Fordyce disease usually present abruptly after individual has experienced heat, humidity, friction, exercise in the commonly affected regions of the body, that leads to the outbreak of the itchy bumps. Emotional stress and hormonal fluctuations could also be contributing symptoms leading to this disease. Itching that is characteristic to the disease can be mild or severe affecting daily activities. There are also individuals whom have the visual presentation but have no symptoms of itching. Symptoms of the disease can be exacerbated during the menstrual periods. Severe Fox-Fordyce disease can cause damage to the hair follicle causing the inability to sweat in a specific location. Affected hair may present as dry, scarce, or absent.

Treatment for Fox-Fordyce disease is focused on patient specific symptoms, but the initial treatment modality is topical therapy such as topical steroids, clindamycin (antibiotic), and calcineurin inhibitors like pimecrolimus or tacrolimus prior to using systemic or surgical therapies. Some of those therapies consist of oral contraceptives, laser therapy, or botulinum toxin injections. For individuals who experience no improvement with medications, the destruction or removal of apocrine sweat glands has been effective in a few cases. There is not a universal treatment plan given to all patients. There is currently no medically therapeutic cure for Fox-Fordyce disease, though some patients experience improvement or resolution of the disease during pregnancy or during post-menopause. Women with Fox-Fordyce disease should be educated that this disease can continue for many years and may need management of skin care in those sensitive regions the disease affects.