ABSTRACT

CUTANEOUS LESIONS FOUND IN ASSOCIATION WITH

TROPICAL SPASTIC PARAPARESIS

Valerie Patricia Fletcher

This thesis examines the relationship of tropical spastic paraparesis (TSP) with distinct cutaneous changes. TSP, a chronic myeloneuropathy, is known to be associated with human T-cell lymphotropic virus type-I (HTLV-I). The other major HTLV-I-associated diseases are adult T-cell lymphoma/leukemia (ATL) and infective dermatitis (ID). These two diseases have characteristic cutaneous manifestations that have been well documented. Very little has been written about the skin changes seen in Jamaican TSP patients, and the purpose of this study was to document any characteristic cutaneous lesions found in association with TSP. The study also sought to determine whether any significant skin lesions found were related to the neurological disease, HTLV-I, laboratory findings, or all these factors.

In the earlier chapters, relevant reports on the subjects of HTLV-I, TSP, and the previous findings of cutaneous changes are summarized. Thirty (30) HTLV-I seropositive and eight (8) HTLV-I seronegative TSP patients were compared with
eleven (11) HTLV-1 seropositive and twenty (20) HTLV-1 seronegative controls. The study involved a detailed questionnaire that sought to establish relevant demographic details and medical history. A clinical examination was done, with an emphasis on the dermatological and neurological examination, followed by laboratory studies. Twenty-nine (29) different skin lesions were found in TSP patients and controls. Acquired ichthyosis in sixteen (16) TSP patients and two (2) controls (p = 0.002) and irritant dermatitis in four TSP (4) patients and no controls (p = 0.03) were significantly associated with HTLV-1 seropositive TSP patients, while idiopathic guttate hypomelanosis in ten (10) controls and four (4) TSP patients (p = 0.005) was significantly associated with seronegative controls. Xerosis and cutaneous T-cell lymphoma were thought to be clinically significant. Significant laboratory results were white cell count, serum iron, total iron binding capacity, total serum proteins and globulin, VDRL and latex fixation. These laboratory results were not found to be associated with skin disorders in this study.

The study was limited by the small numbers of patients enrolled and the low response rate among the TSP patients, however the conclusions drawn were thought to be representative of Jamaican patients with TSP who were regular TSP clinic attendees.