PAIN, DISCOMFORT, UNPLEASANT SENSATIONS: THE IMPACT OF SCARS

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INTRODUCTION

Nearly one in two (48.5%) individuals self-report having a scar on their body; more specifically, the percentages per country are as follows: China (37%), Brazil (46%), the United States (53%), Russia (61%) and France (51%). Approximately one in five subjects (22%) report the focal scar to be less than 1 year old. The average number of scars reported does not differ according to gender (4.1±4.9).

Despite the high frequency of scars, no evaluation has examined the impact of scars in terms of discomfort, pain or unpleasant sensations, or changes in the scar (positive, negative, or no change) according to certain situations; for example, climatic and daily life factors have never been evaluated in real-life studies.

MATERIAL & METHODS

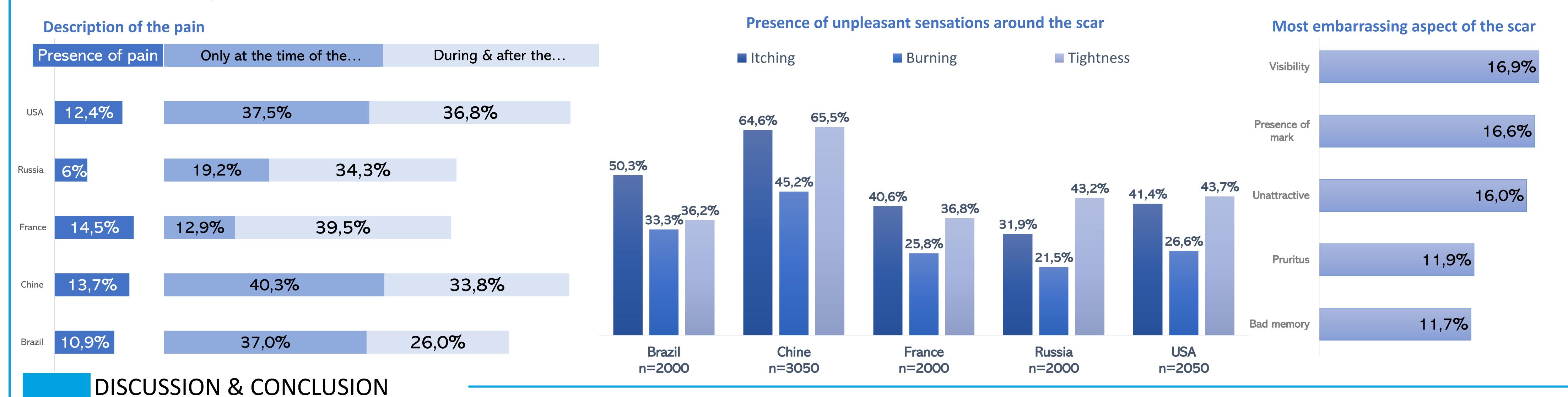
Participants were selected using a stratified random sampling method from a database including several million Internet users who agreed to participate in various panel surveys.

We asked about the participants' socio-demographic information, the presence and origin of scars, unpleasant sensations (pain) associated with scars by means of an online survey carried out in April and May 2020. We asked the individuals about the pain they felt, the unpleasantness of the scar and the discomfort it caused them. To simplify completion of the surveys, we focused on the most recent scar only.

RESULTS

A total of 5384 individuals reported having at least one scar. Of these individuals, 11.33% (n=610) reported pain; 12.3% of the men and 10.4% of the women reported pain associated with the scar (p-value <0.03). Of those who reported pain, 64.59% said they felt pain at the time of treatment, with 30% reporting pain only at the time of treatment and 34.59% reporting pain both during and after treatment. A difference was observed between the men and women, with pain being felt more frequently by the men (68.9% vs. 59.6%, p-value < 0.05). Fifty-five percent of the individuals admitted that the pain from the scar had woken them up at least once in the past 4 weeks (52.3% for women vs. 56.9 for men, p-value < 0.05). On a VAS [0-10, where 0 is no discomfort and 10 is maximum discomfort], discomfort was rated at 2.25 ±2.68. A total of 40.6% (n=2187) of the individuals reported no discomfort, while 10.1% (n=542) reported significant discomfort (score on VAS>7). For 74.9% of the individuals, the scar did not hinder their movement. A total of 45.6%, 30.3% and 45.5% of the individuals reported feeling tightness, burning and itching around the scar, respectively. Of these groups of individuals, 41.3%, 33.6% and 38. 7% rated the intensity of each sensation as greater than or equal to 5 [on a VAS from 0-10]. A total of 46.8% of the individuals complained of scar dryness, and 33% complained of cracks. The visibility of the scar was indicated to be the most annoying aspect of the scar (17%), while the presence of a mark was annoying for 16.6% of the patients, pruritus was annoying for 11.9%, and the unattractive aspect was annoying for 16%.

Overall quality of life was measured by the DLQI with a mean score of 3.24. This score is 2.54 for individuals with a scar older than one year, whereas the score is 2.74 for scars older than 6 to 12 months. Individuals reporting a scar less than 6 months old had a DLQI score of 6.49.



The presence of at least one scar was confirmed by one out of two individuals. Itching, burning, pain and tightness were associated with the scar and even disturbed sleep. More regular care and monitoring should help alleviate these symptoms. It seems important that health professionals take into account the fact that the age of the scar is related to discomfort - the more recent the scar, the worse the DLQI score - so that a better management of scars can be provided.