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## Review Article on Beliefs and Myths of Vitiligo

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### ABSTRACT

*Skin disease is often obvious and very visible to others. Those who have skin diseases have not only to cope with the effects of their disease but also the reaction of others to their condition. There is stigma attached to a wide range of skin diseases, affecting many millions of people, just as there is for mental illness and sexually-transmitted infections. The skin diseases are often incurable and treatments aim to reduce symptoms. Common examples include eczema, psoriasis, acne, rosacea and vitiligo. Whether these conditions are common or very rare, the impact on quality of life can be far-reaching and profound even without stigmatisation. Vitiligo is a pigmentary disorder associated with many disease conditions that necessitates multiple drug regimens, which make the treatment complicated. Most commonly the disease begins during childhood or young adulthood with onset of 10 to 30 years but can occur at any age. This study is done to review the literature related to myths and stigma associated with vitiligo. The people should be given health education by medical staff and myths should be removed. The community health workers should give proper health education to people. Education programs are needed to dispel common myths and misconceptions.*

**Key words:** beliefs, myths, vitiligo

### INTRODUCTION

World Vitiligo Day observed on June 25th is a global initiative aimed to increase awareness about vitiligo and fight prejudice. The choice of June 25 as World Vitiligo Day is a memorial to musical artist Michael Jackson, who suffered from vitiligo and passed away on June 25, 2009. Vitiligo is a pigmentary disorder associated with many disease conditions that necessitates multiple drug regimens, which make the treatment complicated. Most commonly the disease begins during childhood or young adulthood with onset of 10 to 30 years but can occur at any age[1]. Mexico and India have highest incidence of this condition[2]. Although this pigmentary disorder does not produce any physical impairment, it may significantly influence the psychological well being of the patients[3]. They are subjected to isolation, whispered comments, antagonism and insult. In India, this disease is associated with many religious beliefs and the patients are out casted from the family and the society. The prognosis of the disease is very slow and depends on the patient's skin condition and the triggering factors like stress level. The patients, as they are not aware of this fact, prematurely discontinue the treatment; switch on to another doctor, again leading to noncompliance. VITILIGO is a chronic non contagious skin disease that causes depigmentation[8]. It affects approximately 1 to 2% of the total population of the world[9,10].

In India, it is **called safed dag or kod** and it carries much social stigma. Vitiligo is considered as punishment of past sins. Young women face more social stigma and suffer more due to matrimonial reasons. Common response is to conceal lesions, which avoids the possibility of stigmatization, but can cause anxiety and preoccupation with the concealment[19]. Social isolation leads to loneliness, negative effect and ill health, changes in processing of social information, anxiety and even criminality[20].

Most vitiligo patients report feeling embarrassed, which can lead to low self-esteem and social isolation[11]. Vitiligo has often been associated with myths, including a lack of personal hygiene and contagion. Such myths can influence others to act negatively toward the patient and hence often generate feelings of profound stigmatization[12].

This study is done to review the literature related to myths and stigma associated with skin diseases.

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## REVIEW OF LITERATURE

**A review of literature [7]** reported that many patients have developed a “spoiled identity”, or ruined and weakened sense of identity. Vitiligo was also noted to be a barrier to marriage[4]. Studies have shown that over half of those with vitiligo found it challenging to meet strangers or begin emotional or sexual relationships. Based on a questionnaire, over half (56.1%) of 898 male and female subjects residing in Saudi Arabia stated that they would not consider marrying an individual with vitiligo[4]. Of those who did marry, the quality and stability of relationships were noted to be lower compared to those who did not have vitiligo[5]. There are cases of patients who did not disclose their disorder to their spouses before marriage for fear of rejection. Even after marriage, in-law conflicts were not uncommon, with one documented case of a patient who was encouraged to divorce if she was not cured[6]. Depression is a serious repercussion of this disease.

**Another study[13]** revealed a wide range of common public misconceptions about vitiligo. More than 20% thought that it was caused by an infection and more than 22% thought that it was caused by a lack of personal hygiene. Other misconceptions included evil-eye, witchcraft (sorcery), and jinn (evil spirits), which all reveal the prevalence of cultural myths related to this disease. Attitudes toward vitiligo patients were also described, with 56.1% absolutely unwilling to marry a vitiligo patient.

Another study[14] reported the knowledge of female university students in the current study regarding the cause of vitiligo was limited. Although they were highly educated, almost half of them did not know that vitiligo is an immune disease and most of them did not know the exact causation of the disease. It revealed a wide range of common misconceptions about vitiligo. Beliefs about the cause of vitiligo were striking as almost one-third believed that it is an infectious disease and more than 45% thought that it is associated with the habit of intake of certain food (Fisk and milk). 40.9% of the participants from female university students were absolutely unwilling to marry a vitiligo patient. Moreover, almost a quarter of our participants did not accept sharing food with vitiligo patient.

A hospital based study in Central India[15] reported the prevalence of thoughts of pity, hate or fear to touch, or talk with a patient. 69.14% of the study participants were unwilling to marry a vitiligo patient even when he or she was otherwise a suitable match. Many diet related myths were prevalent as (almost one-third of the participants believed in them), like implicating sour food/white food/fish, etc.

Another study [16] reported that the most common belief regarding the cause of the disease was stress (84%), followed by excessive sun exposure (37%) and heredity (22%). The patients were not hopeless about the cure and control of vitiligo. Indeed, 47% believed their illness would improve with time. 12% reported feeling depressed when thinking about their illness. More than half of the patients knew the name of their illness. When the impact of the self-image of vitiligo was questioned, 80% of patients indicated that vitiligo did not have a serious impact on their relationships with family or friends. Moreover, vitiligo did not have a significant impact on work/school performance (91%). In conclusion, the results suggest that a majority of the patients had knowledge about their illness. They were also aware of the causes.

There are not many details in literature regarding the dietary habits to be followed in vitiligo patients, usually sour food items like citrus fruits, milk products, pickle and others are discouraged[17].

In another study[18], 42.8% of the participants from the general population were absolutely unwilling to marry a vitiligo patient. 69.5% of the participants were unwilling to shake hands with sufferers, and almost a quarter would not share food. This could explain the isolation experienced by many vitiligo patients.

## CONCLUSION

Patients need to know that dealing with vitiligo is definitely challenging; but the stronger they are, the faster they'll recover. Educating the public about vitiligo could lead to increased self-confidence, better social integration, and psychological well-being for vitiligo patients. The people should be given health education by medical staff and myths should be removed. The community health workers should give proper health education to people. Separate skin clinic should be opened at the centres and skin specialists should be there at

the clinics. Understanding how belief of myths and misconceptions about skin diseases in a community-in the aggregate ,as well as among individuals – is important for the development of programs and policies.Education programs are needed to dispel common myths and misconceptions. Government of Maharashtra has passed an order to ban the use of the term swetha kustha replacing it with the term “SWETHA TWACHA” similar efforts have been undertaken by government of Tamilnadu and other state government.

### Counselling :

Counseling plays a vital role in helping vitiligo patient’s deal with their plight. They need to be educated about the non contagious nature of their skin condition. That they can lead a normal and happy life if they stuck to a healthy lifestyle. They can be sent to a dietician or a nutritionist to help them with their diet that helps with speedy recovery.

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