



MEDICAL RESEARCH DURING PANDEMIC: ADAPTING & INNOVATING IN ADVERSITY

14TH DECEMBER 2021

ABSTRACT BOOK



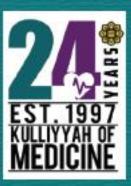




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HEMATIDROSIS AND HEMOLACRIA: A RARE CASE OF BLOODY SWEAT AND TEARS Noraini Musa¹, Mohd Aizuddin Abd Rahman¹, Nor Azam Kamaruzaman², Iskandar Firzada Osman² ¹Department of Family Medicine, Kulliyyah of Medicine, International Islamic University Malaysia, Kuantan, Pahang.

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Hematidrosis is a very unusual disorder in which healthy skin secretes blood while hemolacria is bleeding from the eyes. Scarce case reports mainly occurred in adolescent Asian girls. Majority were caused by psychogenic stress although systemic disease, blood problems, and strenuous physical exertion are possible aetiologies. Specific investigation to establish the diagnosis is still a dilemma but a greater challenge in primary care is to identify and manage the stressor in a teenage patient. A 16-year-old Malay girl presented to a clinic in Pahang with a one-month history of episodic sweating blood from her forehead and occasionally came as bloody tears. Each episode was spontaneous, brief and associated with panic attacks. Further clinical assessment found no skin trauma or underlying haematological disorder involved. A shared care with the haematology team was arranged which then confirmed the diagnosis. To engage and explore her psychosocial state, CRET (Confidentiality, Rapport, Empathy, and Trust) and HEADSSS framework were utilized. These approaches revealed mild depression precipitated by peers bullying and family conflict. Non-pharmacological therapy (relaxation technique, coping skills, supportive counselling) was instituted at primary care level and psychiatry input was also sought. Eventually her hematidrosis resolved six months afterwards.



Hematidrosis and Hemolacria: A Rare Case of Bloody Sweat and Tears

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INTRODUCTION

Hematidrosis is a very mysterious disorder in which healthy skin secretes blood while hemolacria is bloody tears. Scarce case reports mainly occurred in adolescent Asian girls. The majority were caused by psychogenic stress although systemic disease, blood problems, and strenuous physical exertion are possible etiologies. Specific investigation to establish the diagnosis is still a dilemma but a greater challenge in primary care is to identify and manage the stressor in a teenage patient.





Figure 3 : Sweating from the forehead



Figure 4: No wound after swept over left forehead



CASE REPORT

A 16-year-old Malay girl presented to a government health clinic in Kuantan, Pahang with a one-month history of episodic sweating blood from her forehead and occasionally came as bloody tears. Each episode was spontaneous, brief and associated with panic attacks. Further clinical assessment found no skin trauma or underlying hematological disorder involved.

Hematological assessment and shared care with the hematology team were arranged which then confirmed the diagnosis clinically. To identify the causative stressor, the attending physician had to engage and explore her psychosocial state by applying the principle of CRET (Confidentiality, Rapport, Empathy, and Trust) and utilizing HEADSSS framework (Home-Education-Activity-Drugs-Sex-Suicide-Spirituality)

These approaches revealed a diagnosis of mild depression precipitated by peers' bullying and family conflict as she recently moved to a new school. Non-pharmacological therapies in the form of relaxation technique, coping skills, and supportive counseling were instituted at the primary care level. Psychiatry input was also sought. Eventually her hematidrosis resolved six months afterwards.

DISCUSSION

- Hematidrosis is a rare condition and could occur under conditions of extreme physical or emotional stress as etiologies as shown in this case.
- To diagnose this rare disorder, a shared care between primary care team with hematology team is an appropriate strategy.
- In taking history, CRET and HEADSSS are relevant approaches to facilitate communication and creating a confidential and respectful environment with adolescent patients.
- Comprehensive outpatient management with patient centered care is sufficient to alleviate this unusual condition.

CONCLUSION

Stress might express physically and psychologically in a variety of ways. Sweat and tears signify hardship but when they become bloody, doctors need to explore the presence of extreme stress as the contributory component especially among adolescent. Once the primary issues are addressed well, spontaneous remission may occur.

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