



Letter to the Editors

Dermatoses and traditions: Fissured plantar keratoderma, a discriminating factor in bantu society in the Congo Brazzaville^{☆,☆☆,★}



Dear Editors,

Traditional Bantu society in Congo Brazzaville has undergone cultural changes during their long migration history (Randles, 1974). Exchanges and progress have positively improved women's experiences, but the sociocultural burdens due to prohibitions, obligations, and submission have made these same women victims and sometimes feeling guilty about having disease (Fig. 1).

The fissure form of plantar keratoderma is an anomaly for which women have experienced discrimination. Hulderson (2002) reports on sociological facts related to dermatology to show the interest of their approach on the role of culture in patient care. The facts reported are historical, from oral transmission, despite the criticisms of orality (Mouralis, 2012). The sources of information were varied: women (victims or not), the elderly, a traditional practitioner, and a Congolese historian.

The rejection of women's fissured plantar keratoderma is legendary among the Bantu population of Congo Brazzaville. The notion of asocial, amoral, and unnecessary disease could play a role in this rejection. Public humiliation from clan and marital partners, divorces, forced celibacy, and depreciation were the current burdens of women with fissured plantar keratoderma. For example, no meals cooked by a woman with fissured plantar keratoderma were consumed by her husband or other clan members. In addition, the selective rejection of her offspring at the expense of girls was the rule.

Plantar keratoderma are heterogeneous groups of skin diseases characterized by diffuse or focal plantar keratosis. Plantar keratodermas are hereditary or acquired, and the hereditary forms are isolated or associated with complex cutaneous visceral disorders. The etiologies of the acquired forms are multiple: climatic, toxic-medicinal, chemical, nutritional, paraneoplastic, infectious, immunoallergic, idiopathic, and aquagenic (Patel et al., 2007).

In Bantu societies of Congo Brazzaville, fissured plantar keratodermas were attributed to poor personal hygiene or leprosy. The cultural influence linked to the symbolism of the feet in many civilizations (Zerbe, 1985) could explain the attachment to foot esthetics.

The prevalence of fissured plantar keratoderma in Congo is unknown. Personal experience at the University Hospital of

Brazzaville does not report any cases of fissured plantar keratoderma in consultation for 1 year; this can be explained by the persistent lack of information as well as ostracism generated by the disease. Hospital consultations could be reserved for exceptionally severe and disabling forms of the disease, while other patients suffer in silence.

The treatment of plantar keratoderma is etiological and/or symptomatic: keratolytic, emollient, puvatherapy, and balneotherapy. Sanding is an aggravating factor in fissured plantar keratodermias, but it is the most proposed procedure.

This work raises the question of gender in Bantu civilizations and helps to ensure that the role of culture in approaching patients is not minimized. The development and training of relay agents would be useful to provide information and educate populations.



Fig. 1. Plantar fissures in a 35-year-old woman.

[☆] Conflicts of interest: The author reports no conflicts of interest.

^{☆☆} Financial Disclosure(s): The author(s) have no proprietary or commercial interest in any materials discussed in this article.

[★] No human subjects were included in this study. No animals were used in this study.

Acknowledgment

The author thanks Mr. Placide Lenga, Congolese lawyer and historian, for his valuable advice.

References

- Hulderson P. Que peut apporter l'anthropologie médicale à la pratique de la médecine? *Rev Med Suisse* 2002;2:22444.
- Mouralis B. Mamousse Diane et la question de la "raison orale". *Rev Lit Comp* 2012;1(341):77–84.
- Patel S, Zirwas M, English 3rd JC. Acquired palmoplantar keratoderma. *Am J Clin Dermatol* 2007;8(1):1–11.
- Randles WGL. La Civilisation Bantou, son essor et son déclin. *Ann Hist Sci Soc* 1974;29(2):267–81.

Zerbe KJ. "Your feet's too big": an inquiry into psychological and symbolic meanings of the foot. *Psychoanal Rev* 1985;72(2):301–14.

Ida Aurélie Lenga-Loumingou
Department of Medicine, University Hospital of Brazzaville, Congo
E-mail address: idalengaloumingou@gmail.com

Received 16 April 2019

Received in revised form 19 October 2019

Accepted 27 October 2019