



# ACTAS Derma-Sifiliográficas

Full English text available at  
www.actasdermo.org



## PRACTICAL DERMATOLOGY

# Allergic Contact Dermatitis by Anatomical Regions: Diagnostic Clues<sup>☆</sup>

E. Rozas-Muñoz,<sup>a,\*</sup> D. Gamé,<sup>b</sup> E. Serra-Baldrich<sup>a</sup>

<sup>a</sup> Servicio de Dermatología, Hospital de la Sant Creu i Sant Pau, Barcelona, España

<sup>b</sup> Servicio de Dermatología, Hospital Germans Trias i Pujol, Barcelona, España

Received 12 January 2017; accepted 30 May 2017

### KEYWORDS

Allergic contact dermatitis;  
Scalp;  
Face;  
Eyelids;  
Neck;  
Hands;  
Trunk;  
Extremities;  
Sites

### PALABRAS CLAVE

Dermatitis de contacto alérgica;  
Cuero cabelludo;  
Cara;  
Párpados;

**Abstract** Allergic contact dermatitis (ACD) is a common disease in daily clinical practice, and its prevalence has increased in recent years. It is characterized clinically by varying degrees of erythema, vesiculation, flaking, and lichenification, though these signs can also be present in other eczematous diseases. Patch testing is the main diagnostic tool to confirm ACD, but its accurate interpretation requires correct correlation with the medical history (details of exposure) and physical examination. We provide a practical and instructive description of the most common clinical patterns of ACD depending on the area affected. Knowledge of these patterns will not only help the clinician reach the diagnosis but will suggest possible allergens and forms of contact.

© 2017 Elsevier España, S.L.U. and AEDV. Published by Elsevier España, S.L.U. All rights reserved.

### Dermatitis de contacto alérgica por regiones anatómicas. Claves diagnósticas

**Resumen** La dermatitis de contacto alérgica (DCA) es una enfermedad frecuente en la práctica clínica diaria, con una prevalencia que ha aumentado en los últimos años. Clínicamente se caracteriza por grados variables de eritema, vesiculación, descamación y liquenificación, signos que también están presentes en otros procesos eczematosos. Las pruebas epicutáneas constituyen la principal herramienta diagnóstica para confirmar una DCA, sin embargo,

<sup>☆</sup> Please cite this article as: Rozas-Muñoz E, Gamé D, Serra-Baldrich E. Dermatitis de contacto alérgica por regiones anatómicas. Claves diagnósticas. <https://doi.org/10.1016/j.ad.2017.05.011>

\* Corresponding author.

E-mail address: [docrozas@yahoo.com](mailto:docrozas@yahoo.com) (E. Rozas-Muñoz).

Cuello;  
Manos;  
Tronco;  
Extremidades;  
Localizaciones

su correcta interpretación requiere de una correcta correlación entre la anamnesis (historial de exposición) y el examen físico. En este artículo se describen de forma práctica y didáctica los patrones clínicos más frecuentes de DCA dependiendo de su localización. El conocimiento de estos patrones no solo ayudará al clínico en el diagnóstico diferencial, sino que también le permitirá sospechar el posible alérgeno y su forma de aplicación.

© 2017 Elsevier España, S.L.U. and AEDV. Publicado por Elsevier España, S.L.U. Todos los derechos reservados.

## Introduction

Allergic contact dermatitis (ACD) is a common disease in daily practice, and its prevalence has increased in recent years. Clinically, it is characterized by varying degrees of erythema, vesiculation, desquamation, and lichenification, which are also present in other eczematous processes such as atopic eczema, seborrheic eczema, contact eczema, and dyshidrotic eczema.

Given that the clinical and pathological characteristics of these processes are similar, our main tools for classification are the clinical history and physical examination, with emphasis on the location of the lesions. The present article provides a practical and instructive review of the most common clinical patterns of ACD depending on their location. It is important to stress that the description and names proposed to describe these patterns are the fruit of the literature review and the authors' experience; therefore, they should be used for guidance only and are by no means specific to ACD.

Furthermore, in some cases, a brief comment is made on the most relevant allergens in each region.

## Scalp

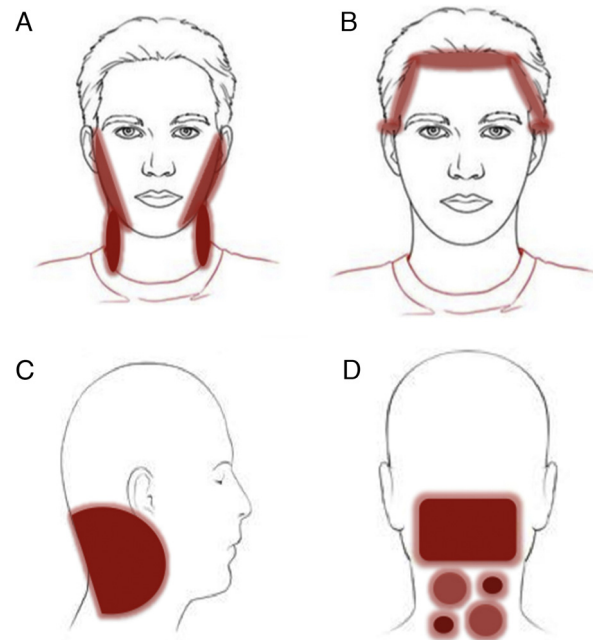
Despite the fact that the scalp is constantly exposed to various everyday allergens, ACD is uncommon at this site. The greater thickness of the epidermis, the absence of folds and wrinkles, and the abundance of pilosebaceous glands all act as the perfect barrier to allergens. Even if a very potent allergen makes contact with the scalp, the most likely finding is that the patient will present symptoms and signs of dermatitis at another site, such as the face, eyelids, or neck.

## Patterns (Fig. 1)

Two of the 3 eczema patterns discussed below actually apply to sites other than the scalp. These are discussed in this section for practical reasons, as they are the areas most affected by the allergen.

### Rinse-off pattern

Eczematous plaques on the sides of the face (preauricular and mandibular) and neck. The lesions are produced by the allergen running along the side of the face. The pattern is typical of shampoos, conditioners, and other products that are applied temporarily to the scalp and make brief but



**Figure 1** Clinical patterns of allergic contact dermatitis affecting the scalp.

A, Rinse-off pattern: eczematous plaques on the sides of the face (preauricular and mandibular) and neck; B, C, and D, pattern along the hairline. B, Forehead and area above the ears. C, Occipital and retroauricular area.

recurrent contact with the skin of the face (Fig. 1A and Fig. 2).

### Hairline pattern

Eczematous plaques found at the limit between the scalp and the skin of the face, including the forehead, retroauricular region, nape of the neck, and the area above the eyebrows. The pattern is typical of dyes and perming solutions (Figs. 1B, C, and D and Fig. 3).

### Geographic pattern

Eczematous plaques confined to the area of contact with the allergen. Typical of objects (Fig. 4).

## Allergens

The products most frequently described in ACD affecting the scalp are hair dyes, followed by shampoos and

Download English Version:

<https://daneshyari.com/en/article/8709903>

Download Persian Version:

<https://daneshyari.com/article/8709903>

[Daneshyari.com](https://daneshyari.com)