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ORIGINAL ARTICLE

Diagnostic Tools to Use When We Suspect an Allergic Reaction to a Tattoo: A Proposal Based on Cases at Our Hospital[☆]

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KEYWORDS

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Abstract

Introduction: Tattooing has become a popular practice in western countries, particularly among younger populations. Tattoos, however, can cause complications, such as infections, allergic or foreign-body reactions, and even systemic inflammatory responses.

Patients and methods: We conducted a retrospective study of all patients seen for tattoo-related complications at our skin allergy unit between January 2002 and December 2016.

Results: We studied 23 patients. Nine of these experienced early complications, all related to infection. The other 14 patients developed late reactions. Ten were diagnosed with probable allergic contact dermatitis to ink, but the suspect allergen was identified in just 3 cases and confirmed in just 1 of these. There were 2 cases of cutaneous sarcoidosis, 1 case of foreign body granuloma, and 1 case of neuropathy.

Conclusions: Complications resulting from tattoos are relatively common dermatology complaints. Drawing from our experience, we propose a diagnostic algorithm designed to guide dermatologists in evaluating different reactions to tattoos and prescribing appropriate treatment.

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PALABRAS CLAVE

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¿Qué procedimientos diagnósticos deberíamos realizar ante una sospecha de reacción alérgica a un tatuaje? Propuesta basada en nuestra casuística**Resumen**

Introducción: Los tatuajes se han convertido en una práctica muy popular en los países occidentales, sobre todo entre los más jóvenes. Las complicaciones asociadas a esta técnica incluyen procesos infecciosos, alérgicos, reacciones a cuerpo extraño e incluso procesos inflamatorios sistémicos.

Pacientes y métodos: Se ha realizado un estudio retrospectivo de todos los pacientes que acudieron a la consulta de Alergia cutánea por manifestar complicaciones en un tatuaje desde enero de 2002 a diciembre de 2016.

Resultados: Se han incluido a 23 pacientes. De ellos, 9 presentaron complicaciones de forma precoz y en todos ellos la etiología fue infecciosa. De los 14 pacientes con reacciones tardías, 10 fueron diagnosticados de probable dermatitis de contacto alérgica a la tinta, sin embargo solo en 3 de los casos se pudo apuntar al alérgeno probablemente culpable y tan solo en uno de ellos se pudo demostrar. Se detectaron dos casos de sarcoidosis cutánea, uno de reacción granulomatosa a cuerpo extraño, y un caso de reacción neuropática en una paciente.

Conclusiones: Las complicaciones asociadas a los tatuajes son un motivo de consulta relativamente frecuente en las consultas de Dermatología. Proponemos un algoritmo diagnóstico basado en nuestra casuística, que ayude a orientar las distintas reacciones a tatuaje y con ello a iniciar las medidas terapéuticas oportunas.

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Introduction

Tattooing has been used to decorate the skin for different purposes since thousands of years ago. It is a very common practice in many cultures, and its popularity has increased in western countries. The number of reports of associated complications has increased in parallel, and recent publications indicate that the incidence of adverse reactions to permanent tattoos is approximately 2%.¹⁻³ The reactions include infections, acute and chronic inflammatory reactions, and flare-ups of skin complaints due to the isomorphic response. Benign and malignant tumors have also been reported on tattoos, although no causal relationship between the 2 phenomena has been established.^{4,5} Current Spanish legislation adopts the resolution of the Council of Europe ResAP (2008) on permanent tattoos, which establishes regulations stating that the packaging must show the conditions of use, date of minimum durability, batch number, and the list of ingredients (the Chemical Abstract Service or Color Index number, according to international nomenclature) and guarantee that the content is sterile. However, since most inks used in Spain are imported from Asia and the United States, they are not subject to this regulation.⁶

The objective of the present study was to describe the clinical characteristics of patients seen at a skin allergy clinic with a tattoo-related complication between January 2002 and December 2016. We also propose an algorithm for managing patients with a suspected allergic reaction to ink and discuss the yield of patch tests and the usefulness of patch testing with the ink itself.

Material and Methods

We performed a descriptive, retrospective study of all patients who were seen at the Skin Allergy Clinic of Hospital General Universitario de Alicante, Alicante, Spain with a tattoo-related complication. We excluded patients whose reaction was to a temporary tattoo. We recorded epidemiological and clinical variables, as well as the results of additional tests. We divided the cohort into 2 groups: patients who experienced early reactions (within the first month after the tattoo) (Table 1) and patients who experienced late reactions (more than 1 month after the tattoo) (Table 2). In addition, patients were grouped according to the clinical pattern observed based on the classification by Serup et al.⁵ Patients with a suspected allergic reaction to ink underwent patch testing, which was performed with the standard series of the Grupo Español de Investigación en Dermatitis de Contacto y Alergia Cutánea (Spanish Contact Dermatitis and Skin Allergy Research Group) or a specific textile series (Chemotechnique Diagnostics); in some cases, a specific metal series (Martí Tor) and the ink supplied by the patient were also used (Table 3).

Results

A total of 23 patients consulted for a tattoo-related skin problem from January 2002 to December 2016. Men accounted for 43.5% (n=10) and women for 56.5% (n=13). The mean age was 36 years (range, 19-58 years). Of the 7 patients who had previous tattoos (28%), only 1 had simultaneous complications on the oldest tattoo (Fig. 1).

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