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CONTACT SENSITIVITY IN PALMAR HYPERKERATOTIC **DERMATITIS**

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230 patients presenting with palmar hyperkeratotic dermatitis were investigated by patch tests against various antigens depending upon occupation of the patients. Contact sensitivity was detected in 130 patients comprising of housewives (55), businessmen (20), farmers (15), teachers / clerks / students (13), doctors and nurses (9), factory workers and labourers (8), massons (7) and motor mechanics (3). Vegetables were found to be the most common agents followed by detergents and metals predominantly affecting housewives. Among the vegetables, garlic and onion were the most potent sensitizers whereas nickel was a common sensitizer among metals.

Occupational factors were seen to have some influence in relation to the causative agents as indicated by higher positivity of vegetables in housewives; detergents, metals, rubber, leather, plastics in businessmen, teachers, clerks and students; fertilizers or animal foods in farmers; drugs in doctors and nurses and chromium and cobalt in massons.

Key Words: Contact sensitivity, Palmar hyperkeratotic dermatitis, Occupational dermatoses

Introduction

Prolonged and repeated contact with certain agents can induce a reaction pattern on palmar skin manifesting as thickening, scaling and fissuring particularly involving tips, palmar surface of fingers and palms of one or both the hands associated with itching and pain. Such lesions termed as hyperkeratotic palmar eczema can occur either due to physical factors like dryness and friction. irritant reaction or allergic reaction.1

Patterns of distribution of the lesions as a result of allergic contact dermatitis depend largely upon the causative agents pertaining to the habits, activities and occupation of an individual providing valuable clues for establishing the cause by patch testing.2

Although, contact dermatitis of hand 40 has been studied extensively by various workers3-6 this study was conducted to assess the role of contact sensitivity in patients presenting mainly with palma hyperkeratotic lesions.

Material and Methods

230 patients presenting with hyperkeratosis and fissuring over palm were selected from out patient department of Dermatology at Dayanand Medica College, Ludhiana. After recording detailed history and clinical examination with particular reference to occupation types of agents handled during dail routines of working and habits, distribution patterns and types or lesions: KON examination of scrapings from the lesion was carried out in all the patients to rule out dermatomycosis.

Patch tests were done vegetables, detergents, metals and other agents depending upon the occupation, a

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per procedures and recommendations made by Pasricha.²

Results

Out of 230 patients presenting with hyperkeratotic lesions over palmar aspects of hands, 130 patients showed positive patch tests as depicted in Table I.

In the remaining 100 patients the lesions were ascribed to occur due to physical factors of friction and dryness or irritant reaction: vegetables (50), detergents (48) and metals (34) were detected to be causative agents in a large majority of patients. All the 50 patients showing positive patch test with various vegetables were housewives. Majority of them (75%) being in the age group of 21-40 years. Among the vegetables, sensitivity to garlic was found in 36 patients followed by onion (10), potato (9), lady's finger (9), green chilli (8), Tinda (7), ginger (5), brinjal (4), peas (4), Arbi (3),

gourd (3), beans (3), radish (3), carrot (2), Shalgam (1), Simla mirch (1), cauliflower (1). Multiple sensitivity was commonly seen within the group as well as with other groups like detergents and metals etc.

Detergent sensitivity was also seen commonly in housewives (30) followed by businessmen (7), farmers (4), teachers, clerks, students (4). Among the metals, nickel sensitivity was seen in 16 out of 34 patients, being more common in housewives (13) followed by businessmen (2) and motor mechanic (1). Other metals (cobalt, ferric chloride and aluminium) were detected to be positive in 2 businessmen each, respectively. Three factory workers and 1 farmer showed sensitivity to ferric chloride, whereas chromate sensitivity was detected in all the 7 massons, 2 of them also being sensitive to cobalt

Table I. Occupation and positivity of patch tests to various agents

Occupation	No. of cases	Veget- ables	Deter- gents	Metals	Hair oils, shampoo	Rubber, leather, plastics	Ferti- lizers, animals Foods	Drugs	Petro chemic- als	Others
Housewives	55	50	30	13	7	4	4	_	-	The second secon
Businessmen	20		7	8	1	4	-	-	-	Wood 1 Gum 1
Teachers / Clerks / Students	40									Paper 1
	13	-	4	1	+	7	-	-	1	Gum 1
Farmers Medical profession	15	-	4	1	1		8		2	Sand 1
Factory workers		-	1	-	•	1	•	9	*	9
14-1	8	100	2	3	2	4	-	-		Wood 1
Massons Motor	7		8	7	w		1.0			Wood 1
mechanics	3		-	1	-	1	-	<u></u>	2	-
Total	130	50	48	34	11	17	12	9	5	7

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42.3% of total cases, which can explained on the basis of their coming contact with agents of wide variety durinday to day routines of household work cooking, washing, cleansing and milking feeding of animals particularly housewives of rural background in India

As earlier reported by various 3. workers, 5-7 vegetables accounted for the highest number of cases of hand dermatite in housewives, garlic and onion being the most common sensitizers. The finding of detergents being the second major group of allergens particularly in housewive agrees with reports of Pasricha & Kanwai and Singh & Singh.8

Among metals, nickel has been reported to be the most common sensitizer, 5-9 as also indicated by this study being more common in housewives due to utensils, door handles and knobs etc. Detection of chromate sensitivity in all the massons and 2 of them also showing positive patch test with cobalt can be explained on the basis of their coming it contact with cement which contains both chromate and cobalt. 10

Certain other agents showing positive patch tests corresponded well will the occupation of patients e.g., anima foods and fertilizers in farmers and housewives of rural origin; drugs and antiseptics in personnel of medical profession; rubber, leather, plastics if clerks, students teachers. ant businessman; hair oils and shampoos! housewives: petrochemicals in farmers an motor mechanics. Occurrence sensitivity to wood, gum, paper and san may not have much significance in view occurrence in isolated instances.

Hair oils and shampoos also showed higher positivity in housewives caused by mustard oil (4), coconut oil (2), Amla oil (2) and shampoos (3).

Rubber, leather and plastic materials showed more positivity in clerks, teachers, students and businessmen whereas fertilizers and animal foods were common agents in farmers and housewives belonging to rural areas. All the 9 cases sensitive to various drugs belonged to medical profession (pharmacists, nurses and doctors) showing positive patch tests with savlon (7), dettol (2), glove powder (2), nitrofurazone ointment (3) and neomycin ointment (1).

Comments

Palmar hyperkeratotic dermatitis is characterized by thickening of palmar skin associated with scaling and fissuring occurring commonly over tips and palmar aspects of fingers of one or both the hands and sometimes over palms in patchy distribution as a result of occupational factors of multifactorial nature.¹

Contact sensitivity plays an important role in the causation of such lesions as elaborated in the present study by elicitation of positive patch tests against agents of varied nature in 56.5% cases, whereas in the remaining patients physical factors of dryness and friction and irritant reaction could have contributed towards causation of hyperkeratotic lesions by repeated exposures of palmar skin in the occupation of an individual.

In accordance with the earlier reports of higher incidence of hand eczemas in females, 3-7 housewives accounted for

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