

The role of contact dermatitis in eczema

Asmah Johar

Klinik Pakar Kulit Dahlia, Bandar Baru Bangi, Selangor

ABSTRACT

Contact dermatitis is an exogenous form of eczema as a result of contact to either haptens or irritants. Haptens (low molecular weight substances) will bind to proteins in the skin to form a complete antigen. Susceptibility to skin damage by irritants depend upon the physical and chemical properties of the substance, the degree, duration and frequency of exposure and under hydration or over hydration of the barrier layer due to low or high humidity working environment. In the presence of eczema, it is important to exclude contact dermatitis. The followings should receive adequate attention: 1) The duration of sensitization process and clinical manifestations: In predisposed individuals, sensitization occurs within a few weeks or as short as 10 days with no visible skin changes. On subsequent exposure, the reaction can manifest itself within 24 hours. 2) The role of allergens or irritants: They can be the primary cause or worsen eczema. Avoidance of the offending allergens or irritants can either improve or resolved the eczema. 3) The clinical presentations: Eczema have characteristic features. In the acute form there are pruritus, erythematous papules and vesicles. The chronic form is usually lichenified and hyperpigmented. 4) To recognize common haptens by the sites of contact in both genders. 5) Types of common skin diseases where contact dermatitis may be associated with: These include atopic dermatitis, seborrheic dermatitis and irritant or allergic contact dermatitis among healthcare workers (HCWs) due to personal protective equipment (PPE) and hand hygiene measures. There are many common haptens or irritants that can worsen atopic dermatitis or cosmetics that worsen facial eczema. The prevalence of iatrogenic dermatitis in times of CPVID-19 has escalated from 20-50% to 71-91%. Paraphenylenediamine has the potential to aggravate seborrheic dermatitis. There will always be new haptens in the future with increased usage and therefore there are necessities for continuous monitoring by all interested parties. Patch test plays a very important role to confirm the existence of contact dermatitis. There are various guidelines to recommend when it is necessary such as the Clinical Recommendations Based on Expert Consensus Opinion from the North American Contact Dermatitis Group for atopic dermatitis. Identifying these haptens or irritants is essential for a proper management plan and having high index of suspicion in new or difficult to control eczema is worth the effort for better outcome.