

Patch testing with lower concentrations of chromate and nickel

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Key words: chromate; nickel; lower patch test concentrations; shoes; allergic contact dermatitis; coinage. © Munksgaard, 1997.

In the late 1970s in Poland, 73% of a group of 250 consecutive chromate-positive patients with dermatitis, had relapses or exacerbations from shoes (45.6% of the patients reporting the feet as the commonest site of dermatitis) (1). More recently, the development of shoe dermatitis in chromate-positive patients has seemed less frequent. For this reason, 38 chromate-positive patients were tested with lower concentrations of chromate, and asked about foot dermatitis. The results are shown in Table 1. Foot dermatitis was found to be more frequent in patients also reacting to lower concentrations of potassium dichromate. (Since not all patients consented, the patients tested were not consecutive, and the table therefore does not show the current frequency of shoe dermatitis in chromate-positive patients).

Table 1. Occurrence of shoe dermatitis in patients reacting to various chromate concentrations

Lowest chromate concentration (%) eliciting positive patch test	No. of patients reacting	% of patients with foot dermatitis
0.5	3	0
0.25	7	42.9
0.1	6	33.3
0.05	8	50.0
0.025	9	66.6
0.01	5	100.0

Table 2. Results of patch tests with coin in patients positive to various concentrations of nickel sulfate

Lowest nickel concentration (%) eliciting positive patch test	No. of patients reacting	% of patients reacting to coin
5.0	16	18.7
2.5	9	77.7
1.25	11	100.0
0.62	8	100.0
0.3	4	100.0
0.15	17	100.0

After many years, coins of the currency denomination that caused dermatitis are again being used in Poland. For this reason, we tested 65 patients positive to nickel with lower concentrations of nickel sulfate and a coin (10 *groszy*). On the introduction of the coins, we were told that they were 25% nickel. Table 2 demonstrates that all patients positive to 1.25% nickel sulfate were also positive to the coin.

While patch tests with lower chromate concentrations seem to provide useful information about the potential for shoe dermatitis, those with lower concentrations of nickel are probably less useful in predicting tolerance to coinage.

Reference

1. Rudzki E, Kozłowska A. Causes of chromate dermatitis in Poland. *Contact Dermatitis* 1980; 6: 191-196.

Lack of contact allergy in consecutive women with vulvodynia

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Key words: vulvodynia; contact allergy; contact dermatitis; nickel; oral provocation test. © Munksgaard, 1997.

Vulvodynia is defined as chronic vulval burning, stinging, irritation or rawness (1); introital dyspareunia is often a major complaint. It should be differentiated from pruritus vulvae, which is characterized by chronic

itching, and is a diagnosis of exclusion as it may be a presenting feature of other vulval skin diseases, (2, 3). Contact has previously been described in 1 of 5 women with vulvodynia (4).

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