

Correspondence

Reply

To the Editor:

We agree with Dr Fernandez-Peñas¹ when he says that potent topical corticosteroids (TCSs) are used for the treatment of cutaneous T-cell lymphoma through stages IA, IB, and IIA. As the author states, we already claim that our results could partially be explained by confounding by indication or protopathic bias (the cutaneous lesions may have been the cause of treatment).² This has been argued in another study finding apparent increases in rates of lymphoma in TCS users compared with a dermatitis-free population.³ However, we determined exposure to TCS only in the period before the diagnosis of lymphoma (including cutaneous T-cell lymphoma) according to the temporal relationship causality criteria. Any use of TCS after the diagnosis of cutaneous T-cell lymphoma was not considered exposure and cannot explain the findings. The magnitude of the association reported makes confounding by indication alone an unlikely explanation. In addition, confounding by indication may not explain the association we found between Hodgkin disease and TCS because skin involvement in Hodgkin disease is rare.⁴

We think that a field study on the subject would be one possible way to ascertain further whether there is a causal role of TCS and the role of confounding by indication.

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