

sam of Peru in an average of 3.1 % of all tested patients during the years 1954-1959; the variation from year to year was only slight. Hannuksela et al. (1976) found 4.3 % positive reactions. In the period 1935-1965, Rothenborg & Hjorth (1968) found an almost constant occurrence of allergy to wood tars with an occurrence of positive reactions between 2-5 %. From the table it appears that in the period 1972-1976 there was a marked rise in the number of patients with positive patch test reactions to balsam of Peru and wood tars. Even by exclusion of weak reactions with only erythema at the patch test site, the increase is significant. We are of the opinion that this increase in positive reactions to balsam of Peru

and wood tars may indicate an increased frequency of allergy to perfumes in toilet soap and cosmetics in Denmark.

References

- Hannuksela, M., Kousa, M. & Pirilä, V. (1976) Allergy to ingredients of vehicles. *Contact Dermatitis* 2, 105-110.
 Hjorth, N. (1961) *Eczematous Allergy to Balsams*, p. 25. Copenhagen: Munksgaard.
 Rothenborg, H. W. & Hjorth, N. (1968) Allergy to perfumes from toilet soaps and detergents in patients with dermatitis. *Archives of Dermatology* 97, 417-421.

Table 1.

Period of investigation	April 1972- October 1972	October 1972- April 1973	April 1973- October 1973	October 1973- April 1974
Balsam of Peru				
+ + + + +	2.8 %	4.9 %	4.8 %	4.2 %
+ + + + +	1.1 %	2.5 %	2.8 %	2.5 %
Wood tars				
+ + + + +	1.4 %	2.5 %	7.9 %	8.1 %
+ + + + +	1.1 %	1.4 %	1.8 %	2.8 %
No. tested	286	286	290	283
Period of investigation	April 1974- October 1974	October 1974- April 1975	April 1975- October 1975	October 1975- April 1976
Balsam of Peru				
+ + + + +	5.6 %	8.9 %	10.3 %	11.1 %
+ + + + +	5.3 %	5.3 %	5.3 %	7.4 %
Wood tars				
+ + + + +	15.7 %	10.7 %	11.3 %	9.1 %
+ + + + +	5.6 %	4.6 %	6.3 %	5.3 %
No. tested	287	280	282	287

Colophony collar dermatitis

J. KIRK

19 North Terrace, St. Peters, South Australia, 5069

A 25-year-old sales engineer developed an acute dermatitis on each side of his neck beneath his shirt collar. Over the previous 6

years he had suffered from a patchy dermatitis involving face, neck, limbs and hands, with onset following a finger injury. His hand der-

matitis was aggravated by the use of rosin on his squash racquet handle. He had a known Rhus allergy, and his father and paternal uncle (twins) were allergic to adhesive plaster.

Patch tests to the ICDRG series and also to rosin powder were applied. Strongly positive reactions to both colophony and rosin powder were present at 96 hours.

The patient suggested, as an explanation for his neck involvement, the recent pre-wash use of a pressure-pack grease and dirt remover, Preen®, on his shirt collars. Preen is labelled as containing 40 % 1,1,1-trichloro-ethane, but when challenged, the manufacturers admitted that this product did, in fact, also contain colophony.

Sensitization to tropical woods giving erythema multiforme-like eruptions

ROLF HOLST¹, JOHN KIRBY² AND BERTIL MAGNUSSON¹

¹Department of Dermatology, University of Lund, Malmö, Sweden

²Department of Dermatology, St. Bartholomew's Hospital, West Smithfield, London, England

Three cases of allergic contact dermatitis from tropical woods (Rio rosewood, Pao Ferro, *Eucalyptus saligna*) are described. The dermatitis started 1-2 weeks after exposure to the materials and developed into erythema multiforme-like eruptions. In one of the patients the histology resembled toxic necrolysis. All three patients had strongly positive patch tests to the woods used.

We have recently observed three carpenters who after working for a short time with tropical woods, Rio rosewood (*Dalbergia nigra*), Pao Ferro (*Mackerrum scleroxylon*) and *Eucalyptus saligna*, developed erythema multiforme-like eruptions. All of them were otherwise healthy and were not taking any drugs. Case 1, however, had an earlier history of stasis dermatitis.

Case 1 (Malmö)

The patient, a male, 65 years of age, had been working for about 1 week with Rio rosewood veneer. Within a day he developed a rash on the face, arms and upper trunk. He had been working with his upper trunk naked. He also had a fever of 39.5°C. The skin eruption was maculopapular, but vesicles and small bullae were present on the wrists. The clinical picture was similar to a drug eruption. Despite treatment with betamethasone orally and locally, the skin eruption worsened and the rash spread to the groin and thighs, with the development of large bullae on the hands, arms and trunk. The eruption only slowly subsided on

treatment with betamethasone up to 9 mg daily. He was able to leave the hospital after 14 days.

Histology. A biopsy was taken from inflamed skin close to a bulla. It showed a total necrolysis of the epidermis and only a mild perivascular infiltrate; that is a picture resembling toxic necrolysis (Lyell 1967).

Patch tests. One month after the dermatitis had healed the patient was tested with the Rio rosewood (dry sawdust) and the ICDRG standard series. There was a strong positive response to the sawdust. It gave negative reactions in controls. A weak reaction was found to caine-mix, which could probably be explained from earlier treatment of his stasis dermatitis with benzocaine-containing ointments.

Case 2 (Malmö)

A male, 65 years of age, also developed an intense vesicular dermatitis on the face and arms after working for about 1 week with a tropical wood, Pao Ferro. After treatment with oral and topical corticosteroids for a week the dermatitis had nearly healed, but he then sustained a relapse with spreading of the eruption to the trunk and the thighs. The clinical picture had now changed to rounded, smooth ("subepidermal"), slightly infiltrated plaques of erythema multiforme type. After a further week's treatment with corticosteroids the skin lesions subsided.

Histology. A biopsy taken from the erythema

This document is a scanned copy of a printed document. No warranty is given about the accuracy of the copy. Users should refer to the original published version of the material.