

Pseudo flautist's lip: allergic contact cheilitis from geraniol

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Key words: pseudo flautist's lip; allergic contact dermatitis; geraniol; lip balm; cosmetics. © Munksgaard, 1997.

Flautist's chin, as described by Dahl (1), consists of acneiform lesions. Gardner (2) suggested that it might be caused by sensitivity to nickel, chromium, or other constituents of the alloy of metal flutes. Hausen et al. (3) reported that a flute made of cocus wood caused perioral dermatitis and lip swelling. Inoue et al. (4) reported a flautist with chin dermatitis caused by sensitivity to nickel in a metal flute.

Case Report

A 23-year-old woman presented with severe cheilitis, which had waxed and waned for weeks. She was a student flautist and used a metal flute reed. She had a past history of herpes simplex labialis and used a lip sunblock for prophylaxis. She had begun using a new brand 2 weeks prior to dermatitis onset. Her flute reed contained 92% silver with the balance being brass. She had taped over the mouthpiece to isolate her lip from contact with the metal, but to no avail. The patient and referring dermatologist believed that the dermatitis was related to the flute and thus referred her for patch testing. The lip balm was discontinued following patch testing, after which she achieved gradual healing and was able to use another lip sunblock with impunity. The new lip sunblock contained the same sunscreen agents as the previous product, octyl methoxycinnamate and oxybenzone, but the original product contained herbal extracts of calendula and echinacea, whereas her new lip sunblock did not.

She was patch tested to an extended standard series, metal compounds, sunscreen agents with and without UV light, and her lip care, cosmetics, hair care and skin care products. There was a ++ reaction to the original lip balm and a ++ reaction to geranium oil 5% pet. The manufacturer confirmed that the herbal extract contained geranium oil.

Discussion

We have used 5% geranium oil for patch testing for 3 years without any false-positive irritant reactions. This therefore constitutes another potential cause of flautist's cheilitis. Ophaswongse & Maibach (5) have reviewed the causes of allergic contact cheilitis in detail.

Reference

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Contact sensitivity to 1-(4-(2-chloroethyl)phenyl)-2-chloroethanol in a polymer chemist

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Key words: allergic contact dermatitis; contact urticaria; polymer chemist; 1-(4-(2-chloroethyl) phenyl)-2-chloroethanol; occupational; laboratory workers. © Munksgaard, 1997.

Case Report

A 33-year-old organic polymer research chemist presented with intermittent urticaria and eczema on the forearms, face, neck and lower limbs. His symptoms started a month after he commenced synthesizing the

halogenated aromatic molecules 4-(2-chloroethyl)phenylchloromethyl ketone and 1-(4-(2-chloroethyl)phenyl)-2-chloroethanol (Fig. 1), which are intermediates in the synthesis of the monomer 4-vinylphenyloxirane (1). The intermediates are non-volatile and form fine white

powders at room temperature. He noted urticaria within hours of exposure to them, which evolved into eczema after 1–2 days. Working in a fume cupboard, and wearing gloves and a laboratory coat did not prevent the skin lesions. After several months, he also started to develop mild respiratory symptoms at work. Withdrawal from laboratory work led to complete resolution of the skin lesions. He had no past history of skin disease or atopy, and no other laboratory staff were similarly affected.

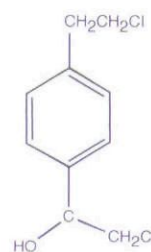
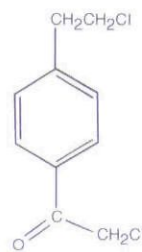
Patch testing to the European standard series showed allergic reactions to paraphenylenediamine (D2 ++, D4 +) and caine mix (D2 +, D4 +), and a series of facial allergens were negative. Patch testing with the organic chemicals showed the following results:

	D2	D4
1-(4-(2-chloroethyl)phenyl)-2-chloroethanol 1% MEK	+++	+
1-(4-(2-chloroethyl)phenyl)-2-chloroethanol 0.1% MEK	+	
1-(4-(2-chloroethyl)phenyl)-2-chloroethanol 0.01% MEK	?+	
4-(2-chloroethyl)phenylchloromethyl ketone 1% in MEK	?+	?+

The purity of both chemicals was confirmed to be greater than 99%. Patch testing was negative in 20 control patients.

Comment

The risk of contact allergy from novel or uncommon organic substances is unknown, and we have been unable to find any previous reports of allergic contact dermatitis from 1-(4-(2-chloroethyl)phenyl)-2-chloroethanol. Our patient had additional symptoms suggestive of immediate-type hypersensitivity, although he was not prick tested. The widespread nature of his eruption could have been due to airborne spread of the fine powder. The rel-



4-(2-chloroethyl)phenylchloromethyl ketone 1-(4-(2-chloroethyl)phenyl)-2-chloroethanol

Fig. 1.

evance of his allergic reactions to caine mix and paraphenylenediamine was undetermined.

Recent advances have taken place in understanding how low molecular weight molecules react with skin proteins to form complete allergens, and the reactive chemical groups of common contact allergens have been identified (2). Computer-based expert systems are being developed in an attempt to predict the sensitization hazard of new compounds, based on the presence of structural alerts for chemical reactions and factors that modulate them. Analysis with the expert system DEREK (3) showed that both chloroalkyl groups in 1-(4-(2-chloroethyl)phenyl)-2-chloroethanol were structural alerts for skin sensitization.

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Rôle of allergic contact dermatitis in rosacea

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Key words: rosacea; allergic contact dermatitis; cosmetics; medicaments; cosmetic intolerance. © Munksgaard, 1997.

Patients and Methods

Over a period of 38 months, 29 consecutive patients (4 male and 25 female), aged 18–75 years (mean age 53 years), with rosacea of the face (1, 2) were enrolled in a study. 15 patients had flushing, erythema and telangiectasia, 12 papulopustular rosacea, and 2 males rhinophyma. All patients described intolerance to cosmetics and/

or topical medicaments, exhibited by worsening of burning sensation and of erythema, scaling and papulopustular lesions. Each patient was patch tested with the GIRDCA standard series, preservatives series, emulsifiers series, perfumes series and their own cosmetics and medicaments. Patch tests were read after 2 and 3 days in accordance with GIRDCA recommendations.

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