

An aspect of contact dermatitis in China

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This report comes from Kwangchow, China. A total of 440 out of 550 peasants (80 %) who were engaged in gathering and transplanting rice (*Oryza*) had dermatitis of the hands, less commonly of the thighs and forearms. This form of dermatitis occurred among the ordinary people and peasants working in paddy fields. Of 875 subjects from a school who were examined, 272 (31 %) were found to have dermatitis. The forearms, upper arms, elbows and neck were affected in this group. Patch tests produced positive reactions to the scale

hairs of the tail of a rice insect *Schoenobius incertellus*. The symptoms disappeared after stopping work in the fields and there was no more contact with the female moth and its eggs (Anon. 1974). It seems that dermatitis is common in these groups of Chinese people and that a relevant cause has been identified for them.

Reference

Anon. (1974) 712 cases of yellow rice borer dermatitis. *Chinese Medical Journal* 5, 79.

Occupational allergic contact dermatitis from chloracetamide in glue

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Two male patients, KS, 45 years old and PK, 52 years, were both house-painters. KS had a hand dermatitis 15 years ago lasting one year. Patch test was positive to wood tar, and the significance of the test reaction was uncertain. Five years ago he was treated for a photo-toxic skin reaction from a paint containing a wood preservative. During the next three years the patient had relapsing hand dermatitis. After being relatively well for one year, the patient again had a hand dermatitis requiring sick leave.

PK developed a hand dermatitis five years ago. Routine patch tests were positive to nickel and chromium and additional tests to wallpaper-glue were also positive.

During the last 1-2 years, both men had hung wallpapers and glassfibre fabric more often than usual. The wallpapers were made from vinyl plastic and of a waterproof type used in bathrooms and kitchens. The wallpapers and glassfibre fabric were hung by

means of a polyvinyl acetate based glue meant specifically for these types of wallpaper. The glue was delivered in a liquid, ready for use.

KS was tested with 10 % glue and the reaction was positive. Both patients were tested with components of the glue, and both showed a positive reaction to chloracetamide 0.1 % and formaldehyde 2 %. The two components occurred in the glue as a preservative in concentrations of 0.1 % and 0.2 % respectively. In glues delivered in liquid form, ready for use, some preservative is necessary to prevent bacterial growth. Two other producers of glues were asked about the eventual use of chloracetamide as a preservative. None of the firms used chloracetamide in glues, but one of them used chloracetamide as a preservative in shoe polish.

Contact allergy to chloracetamide as a preservative in cosmetic cream (Calnan 1971, Klaschka 1975, Nater 1971) and in Hirudoid ointment (Smecnk & Prins 1972) has been re-

ported earlier. The sensitizing properties of chloracetamide in a modified Draize test has been investigated (Maibach 1971).

References

- Calnan, C. D. (1971) Chloracetamide dermatitis from a cosmetic. *Contact Dermatitis Newsletter* 9, 215.
- Klaschka, F. (1975) Contact allergy to chloracetamide. *Contact Dermatitis* 1, 265.
- Maibach, H. (1971) Allergic Sensitization Potential (Draize Test) in Man of Several Preservatives. *Contact Dermatitis Newsletter* 9, 213.
- Nater, J. P. (1971) Allergic Reactions Due to Chloracetamide. *Dermatologica* 142, 191.
- Smeenk, G. & Prins, F. J. (1972) Allergic Contact Eczema Due to Chloracetamide. *Dermatologica* 144, 108.

Contact dermatitis to phenothiazines Nemactil® and Decentan®

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A 51-year-old male psychiatric nurse has suffered for five years from a chronic dermatitis of the tips of the thumb and index finger of the right hand.

With these fingers he picked up the pills which he personally gave to the patients in the psychiatric clinic. By this means the pills were taken in his presence, and the dose that each patient received was strictly controlled.

He gave a positive reaction with pure powder from each of the drugs which he handled. The standard series gave negative results.

The results of the special series were:

Nemactil® Rhodia	+++
Decentan® Merck	+++

Nemactil® Rhodia or 8909 R P is cyano-3-(hydroxy-4-piperidine)-3-propyl-10-phenothiazine. It is used in 10 or 50 mg tablets and droplets of a 4 % solution.

Decentan® Merck is 1(2-hydroxyethyl)-4(3-chloro-10 phenothiazinyl)-propyl-piperazine. It is used in 2 mg capsules, 8 mg tablets, and ampoules of 5 mg in 1 cc.

The patient has been sensitized in a very original manner to a well known group of drugs, the phenothiazines.

Patch testing with mercaptobenzothiazole and mercapto-mix

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The results of patch testing with mercaptobenzothiazole, 1 % in petrolatum and with mercaptobenzothiazole mixture (mercapto-mix;

MBT Mix) were recorded at five centres. Mercapto-mix consisted of mercaptobenzothiazole, N-cyclohexylbenzothiazylsulphenamide, diben-

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