

bution of this family of plants, Compositae dermatitis is often misdiagnosed (13).

Sunflowers are widely cultivated in France and the rest of Europe. The frequency of positive patch tests has been reported to be as high as 4.3% among farmers (5). Because allergens are contained in the trichomes of sunflower leaves (5), and because these are easily transported by the wind, the sunflower must be suspected in any airborne dermatitis occurring during summer.

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Contact urticaria from watermelon in a patient with pollen allergy

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Key words: pollinosis; atopy; watermelon; contact urticaria; respiratory effect; benzoic acid; oil of cinnamon.
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Allergies to fruits and vegetables associated with pollen sensitivity have previously been reported (1, 2, 5). Diagnostic features can include lip irritation, oedema, gastrointestinal symptoms, urticaria, and anaphylactic shock (6, 7, 9, 10). Specific IgE has been detected in only a few cases of fruit allergy, the diagnosis in most cases being established by prick tests with fresh foods (7, 8).

Case Report

A 45-year-old woman, with seasonal rhinitis and conjunctivitis, gave a history of urticaria and swelling of her lips on eating watermelon 3 years previously. Following this first episode, she provoked herself every season, her symptoms becoming increasingly serious, finally manifesting themselves as generalized urticaria, swelling of the lips and tongue, and breathing difficulty, accompanied by falling blood pressure.

She showed a total IgE level of 81 kU/l (Phadezym IgE PRIST) and specific IgE levels to perennial ryegrass (0.8 PRU/ml) and ragweed (4.5 PRU/ml) (Phadezym/Phadebas RAST). Patch tests were evaluated after 20 min of exposure to fresh watermelon, and to watermelon previously soaked for 1 h in acetone, water and 70% alcohol (Fig. 1).

At 40 and 60 min following exposure, we observed a contact urticaria reaction to fresh fruit, and to watermelon previously soaked in acetone and water. The test was performed on unscarified skin, and was repeated in 3 control persons, without any positive reactions. Immedi-



Fig. 1. Patch test results with watermelon preparations at 60 min: 1. with water; 2. with acetone; 3. with alcohol; 4. fresh fruit.

ately evaluated patch tests, using an Epipharm patch test series, showed no response. Patch testing with benzoic acid (5%) and oil of cinnamon (3%) produced delayed eczematous reactions (2–3 days) after an exposure time of 20 min.

Comment

A connection between certain inhaled and ingested allergens has increasingly been observed clinically (4, 6). Allergy to fruits and vegetables, in cases of pollinosis, follows the initial sensitization to pollen (2, 3, 5, 10), watermelon sensitivity, as in our case, being a rare event (1).

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Allergic contact dermatitis due to plant extracts in a multisensitized patient

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Key words: topical medicaments; plant extracts; aescin; dragopin; lavender; *Centella asiatica*; herbal remedies; allergic contact dermatitis. © Munksgaard.

Case Report

A 78-year-old atopic man with sulphonamide allergy and chronic venous insufficiency had been treated for over 40 years with many systemic (Clarytine®, Mirco®, Elorgan®) and topical (Fenergan®, Alergical®, Feparil®, Blasteostimulina®, Bazalin®, Balneogel®) medicaments. Since the early years of treatment, an erythematopapular pruriginous dermatitis had developed in the summer,

involving mainly sun-exposed areas. The rash faded 4–6 weeks later, after changing his medication. Photodermatitis due to topical medicaments was suspected.

The patient showed a normal MED (Solar Light Co., Ph., Penn.) to UVA and UVB. Photopatch tests (Waldmann 800) with the Scandinavian series (Chemotechnique); medicaments are detailed in Table 1. Patch testing with the GEIDC standard series showed positive reactions at D2 and D4 to nickel, chromate, PPD, wool alcohols, thimerosal and balsam of Peru. To a cosmetics series (Chemotechnique), there were strong positive reactions to Amerchol L101, sorbic acid, propylene glycol,

Table 1. Positive patch and photopatch tests to products used by the patient and standard series (D4)

	Patch	Photopatch (UVA)
Blasteostimulina® ointment	+++	+++
Feparil® gel	+++	+++
Balneogel® solution	+++	+++
Bazalin® cream	+++	+++
promethazine HCl 1% pet.	+++	+++
p-aminobenzoic acid 5% alc.	+++	+++
evernic acid 0.1% pet.	+++	+++
balsam of Peru 25% pet.	+++	+++
chlorpromazine HCl 0.1% pet.	—	+++

Table 2. Patch test results with the components of Blasteostimulina® ointment (D4)

<i>Centella asiatica</i> extract 2% alc.	+++
lavender essence 2% pet.	NT ^{a)}
geraniol 2% pet.	—
corn oil 2% pet.	—
Glyco-D-116 FAI	—
neomycin sulphate 20% pet.	NT ^{a)}
propylene glycol 5% aq.	NT ^{a)}

^{a)} Positive reaction obtained previously.