SUMMARY

HAND ECZEMA

Definition

Is a description of those cases of eczema that persistently or predominantly affect the hands alone. Extension to the wrists occasionally occurs. It is a condition affecting both sexes.

Incidence

Hand eczema accounted for 21% of all cases of eczema of women out number of men by 2:1.

Aetiology: Contact Dermatitis

It is a dermatitis which results when skin comes into contact with certain substances. It is divided into two groups:

a) Primary irritant dermatitic: There are many substances acting as primary irritants that produce non allergic inflammatory reaction to the skin, e.g., physical factors, e.g., heat or cold. Mechanical factors, e.g., friction or mechanical pressure.

Chemical agent which form the largest group. House-

wife's eczema and ring dermatitis are examples of dermatitis due to chemical primary irritant.

b) Allergic C.D. is a skin lesion resulting from exposure of sensitized individuals to contact allergens.

It is a delayed hypersensitivity reaction. Nickel, chromate and cement dermatitis are examples. Patch test is a biological test designed to detect the presence or absence of delayed type hypersensitivity or cell mediated immunity to specific contact allergen.

Nummular eczema: This is common in young women and as a form of irritant contact dermatitis, in older men.

It is usually start as a single circumscribed patch of eczema on the back of one hand. Emotional stress is usually present in patients with nummular eczema.

Pompholyx: Meaning bubble, it is also known as cheiropompholyx. This is a common form of hand eczema present particularly during the third and fourth decades. Severe pruritus commonly precide the appearance of small vesicles on the sides of the finger and palms. The vesicles resembling sago grains. Pompholyx occur, chiefly in those who are subject to much emotional stress. undoubtedly hyperhidrosis of the palms and soles contributes to the causative factors.

Atopic dermatitis may affect only the hands producing circumscribed irritable lichenified hyperkeratotic lesions notably on the flexor surfaces of the wrists. The back of the hands and less often the palms. Patient with atopic dermatitis usually have a high level of IgE and there is a family history of atopy. Itching plays a very important role in the reaction of the disorder.

Other types of hand eczema: Finger tip eczema

This is a scaling, cracking and fissuring form of eczema. It affects the pulps of the fingers sometimes extending to the palm. It is seen usually in an asymmetrical form as an allergic reaction to gloves and other allergen such as kitchen vegetables. It also seen in women with no evidence of allergic sensitization.

<u>Dyskeratotic eczema</u>: Itching is slight in comparison of other forms of hand eczema. Hormonal factors may be of importance, patch tests are usuafly negative.

<u>Xerotic eczema</u>: It is a mild but persistent form of eczema occurs chiefly in women of middle age. It is worse in winter and results from chapping of cumulative effect of irritants on a dry skin.

Hyperkeratotic eczema of the palms and fingers.

Most frequent in men, it is an uncommon form of hand

eczema presents as highly irritable, scaling fissured hyperkeratotic patches usually on the palms or palmer surface of the pingers.

Phlyctenular eczema of the thenar eminence. This rare form of eczema consists of grouped vesicles and scaling confineds to the thenar eminence and the adjacent border of the hands.

Treatment:

Treatment must be based on an accurate diagnosis and a full assessment of the aetiological factors. In case of acute eczema, treatment must aim first at removing the cause. Calamine or zinc creams are helpful. Itching will be reduced and relieved by systemic antihistamines and reassurance.

In case of subacute: Applications at this stage are based on creams, ointment and pastes.

In case of chronic eczema local applications are usually based on ointment or pastes containing tar or salycilic acid.