بسم الله الرحمن الرحيم

Allergic Skin Diseases

Eczema/Dermatitis

Definition :

Eczema is an inflammatory skin reaction characterized histologically by spongiosis and clinically by itching, redness, scaling and papulovesicular eruption

Presentations of Eczema

Acute Eczema:

Erythema, edema, oozing and papulovesicular eruption

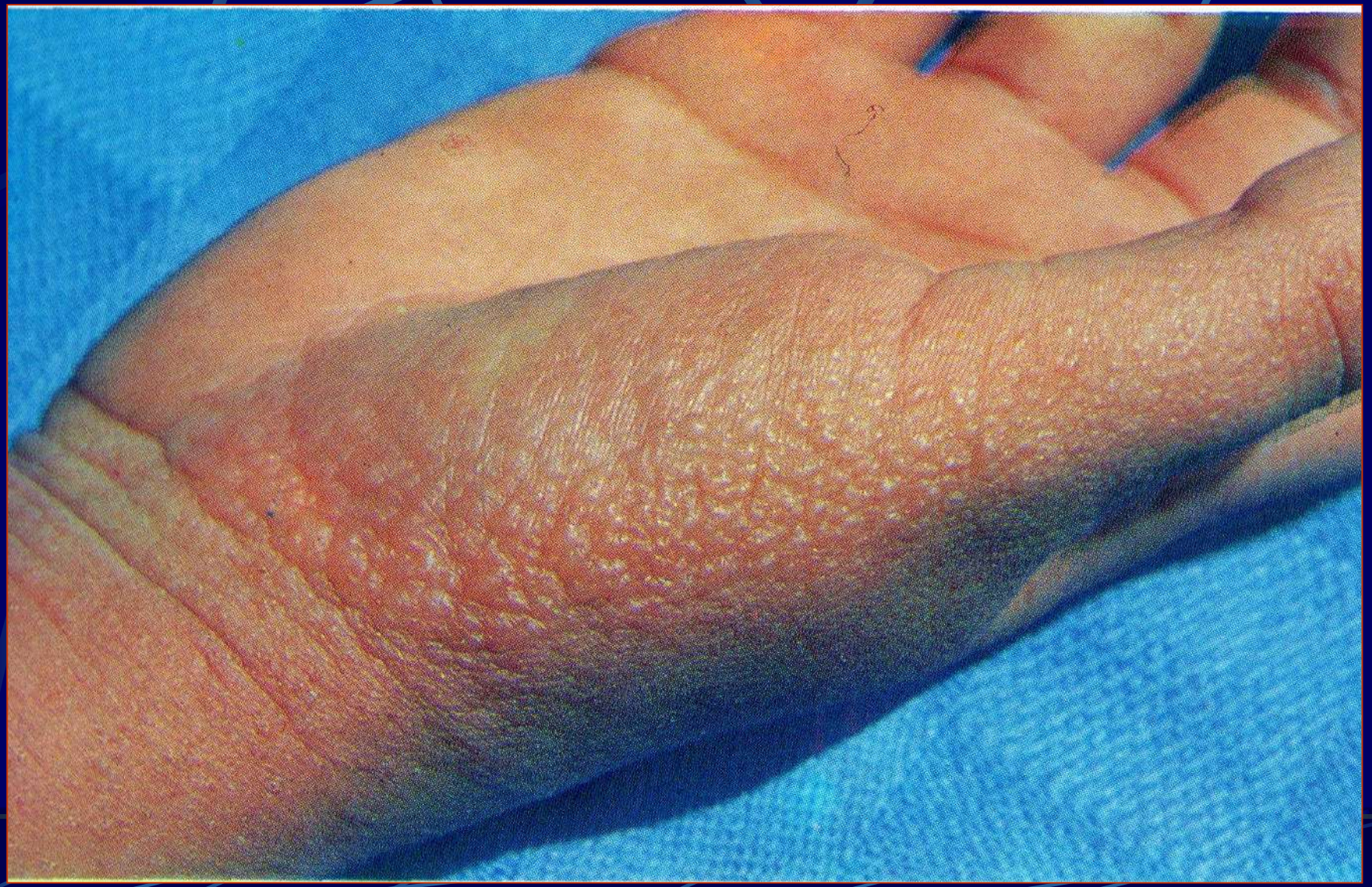
Subacute Eczema:

Less erythema, edema, oozing with scaling and crusting

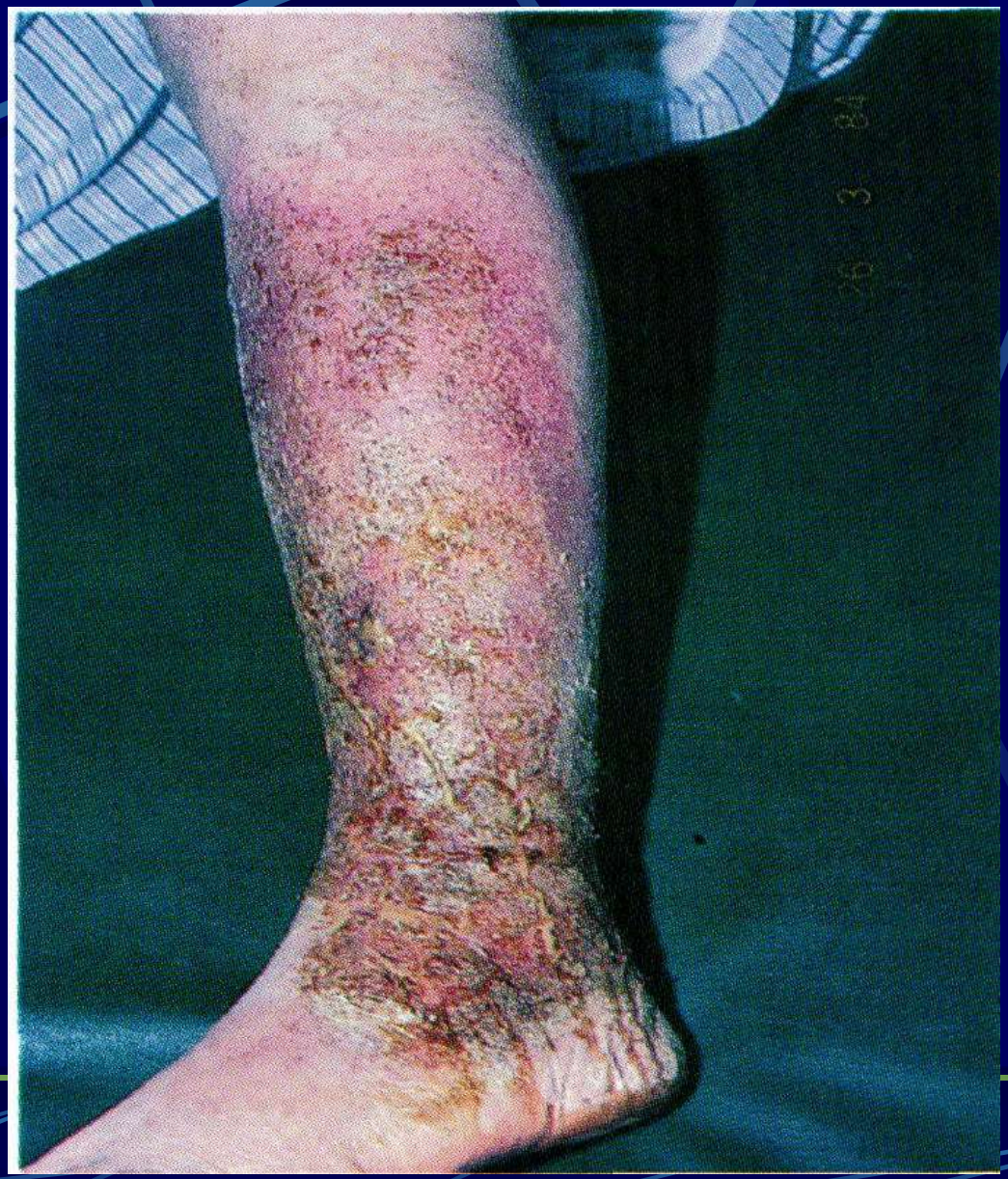
Chronic Eczema:

Thickening and lichenification

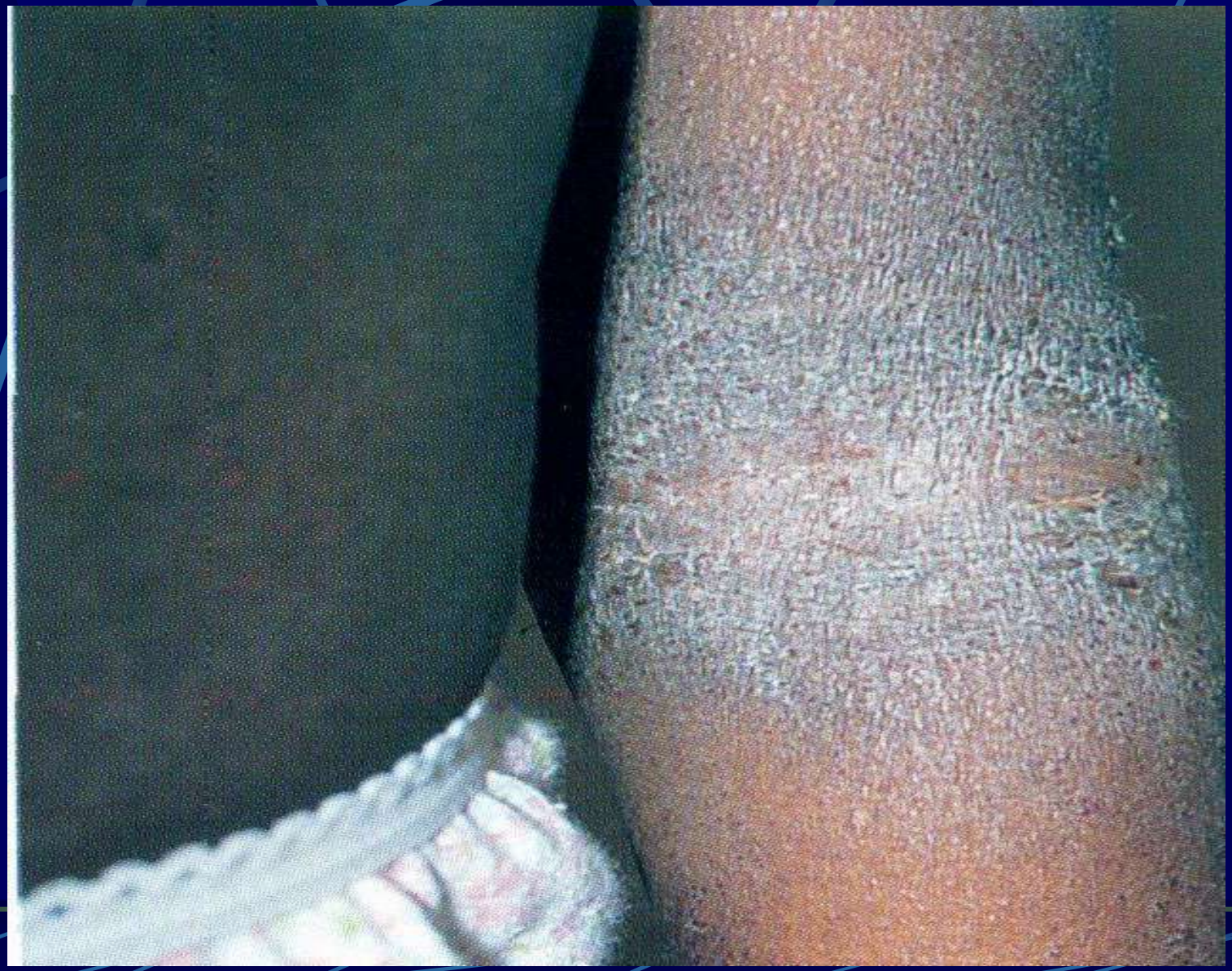
Acute Eczema



Acute Eczema



Chronic Eczema



Varieties of Eczema/ Dermatitis

* *Contact dermatitis*
* *Atopic dermatitis*
* *Infective dermatitis*
* *Seborrhoeic dermatitis*
* *Discoid eczema*
* *Pompholyx*
* *Gravitational eczema*
* *Pityriasis alba*

Contact dermatitis

There are 2 types of Contact dermatitis: irritant and allergic Contact dermatitis

A- Irritant Contact dermatitis

It is an inflammatory reaction in the skin resulting from exposure to a substance that causes an eruption in most people who come in contact with it if a sufficiently high concentration of the substance is used

No previous exposure to the substance is necessary

The effect is evident within minutes or a few hours

Irritant substances:

Alkalies

Weak acid

Detergents

Organic solvents

Topical medicaments

B- Allergic Contact dermatitis

It is an acquired sensitivity to various substance that produce inflammatory reaction in only those who have been previously exposed to the allergen (sensitizer)

It results from cell- mediated immnuity

Common allergens:

Elements e.g. chromium, nickel

Cosmetics e.g. perfumes

Rubbers e.g. clothes,shoes

Medicaments e.g. penicillin, sulphonamides, neomycin

Insecticides

Dyes

Plants

Tar

Clinical picture contact dermatitis :

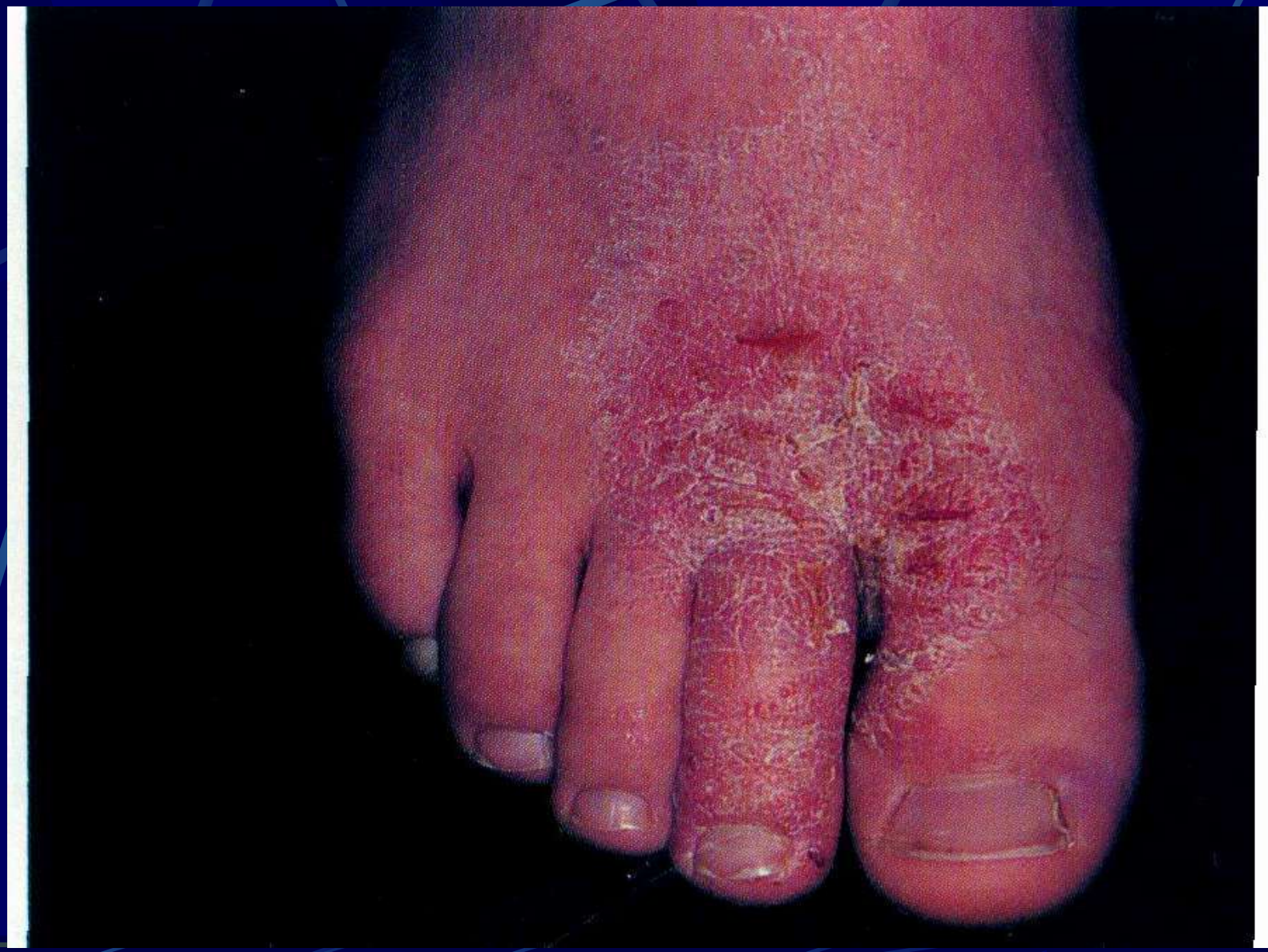
The primary signs in Contact dermatitis are erythema, edema and papulovesicles

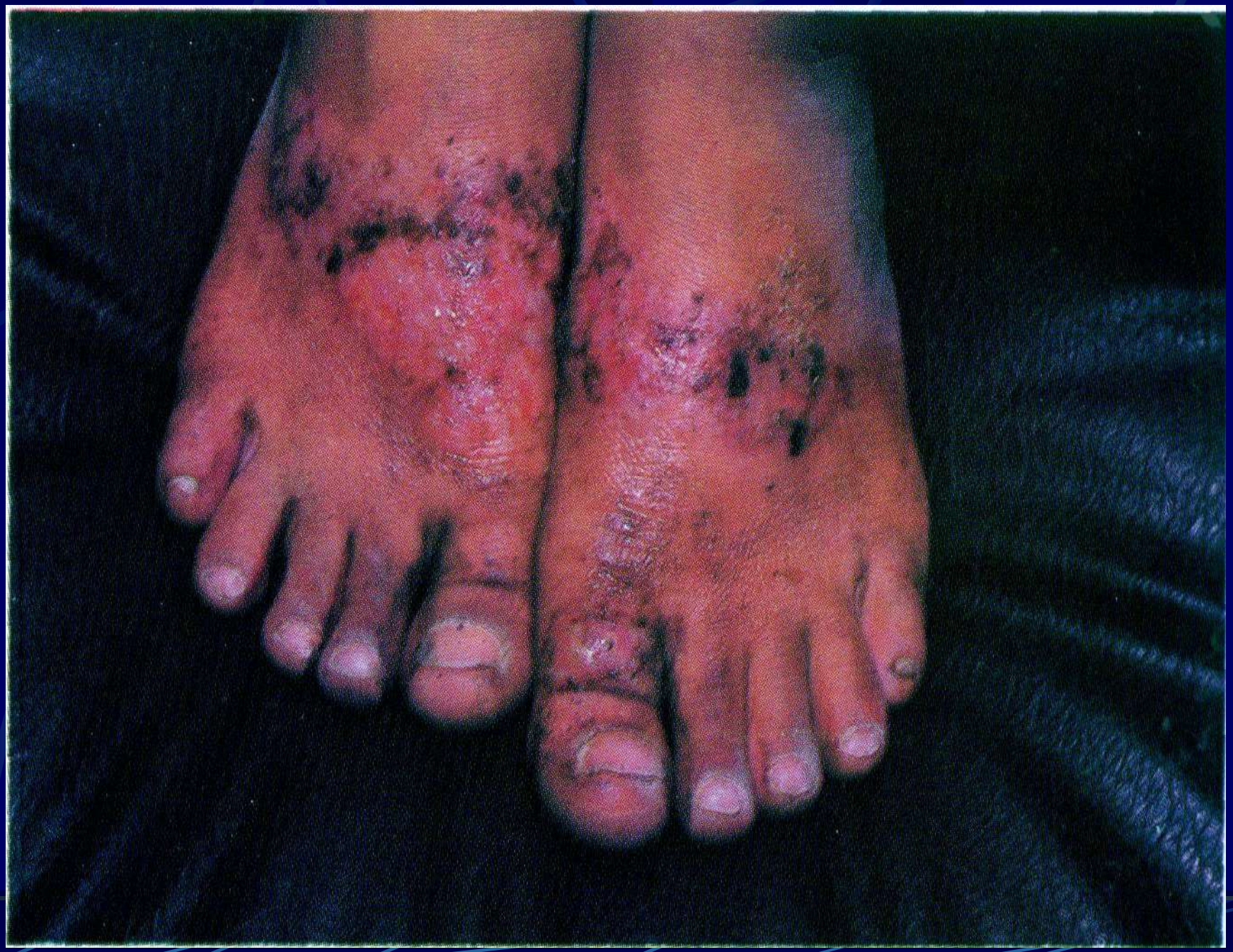
Persistence Contact dermatitis

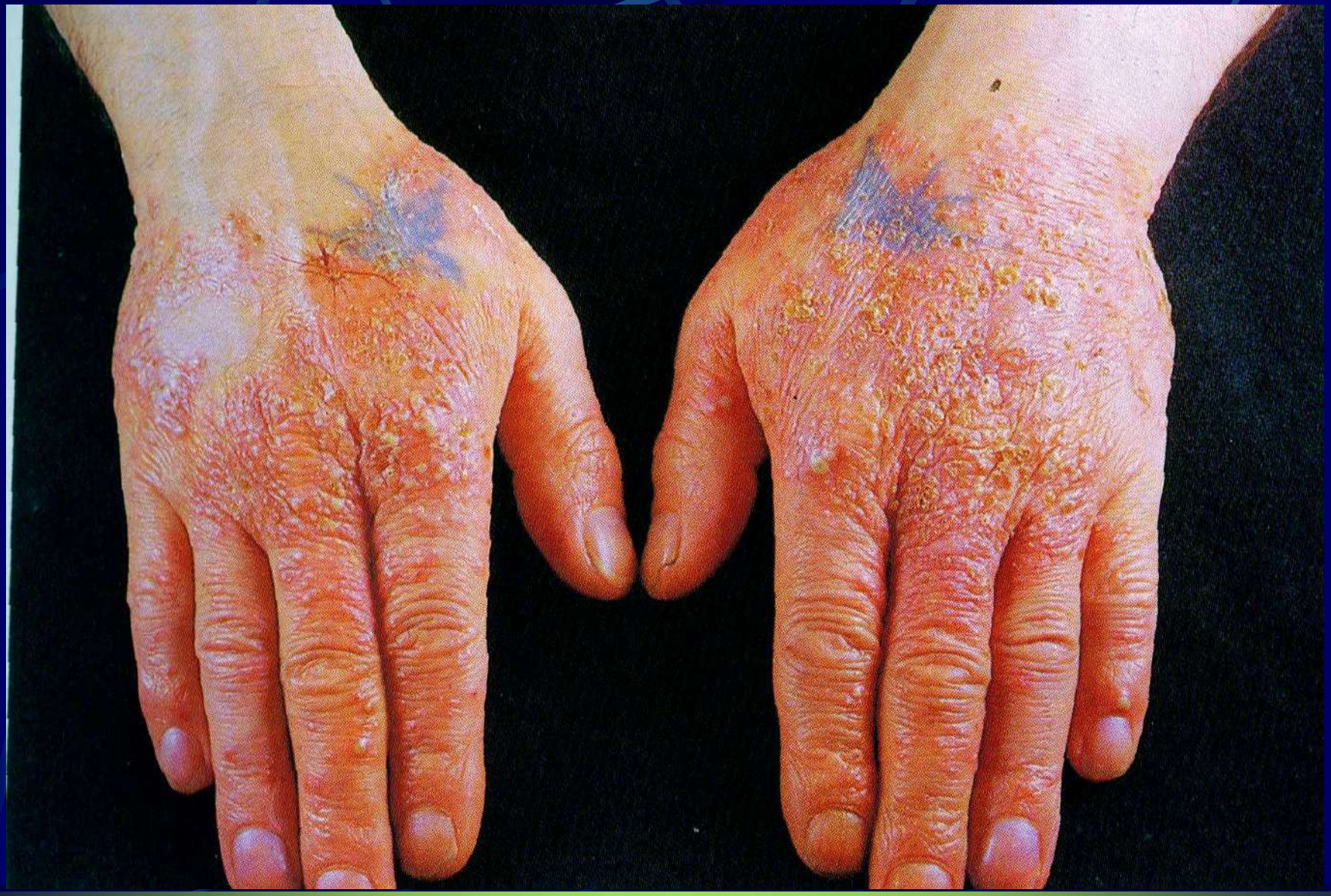
It may be due to continued or repeated exposure to the allergen or irritant

It becomes dry, scaly and lichenification and fissuring may develop

The site and morphology of the lesion may point to the cause







Diagnosis of Contact dermatitis :

* *History*
* *Site and morphology of the lesion*
* *Patch testing in allergic Contact dermatitis*

Treatment of contact dermatitis:

** Detection and avoidance of the cause*

** The sues of protective measures e.g. gloves*

** Treatment of the dermatitis*

Atopic dermatitis

Definition :

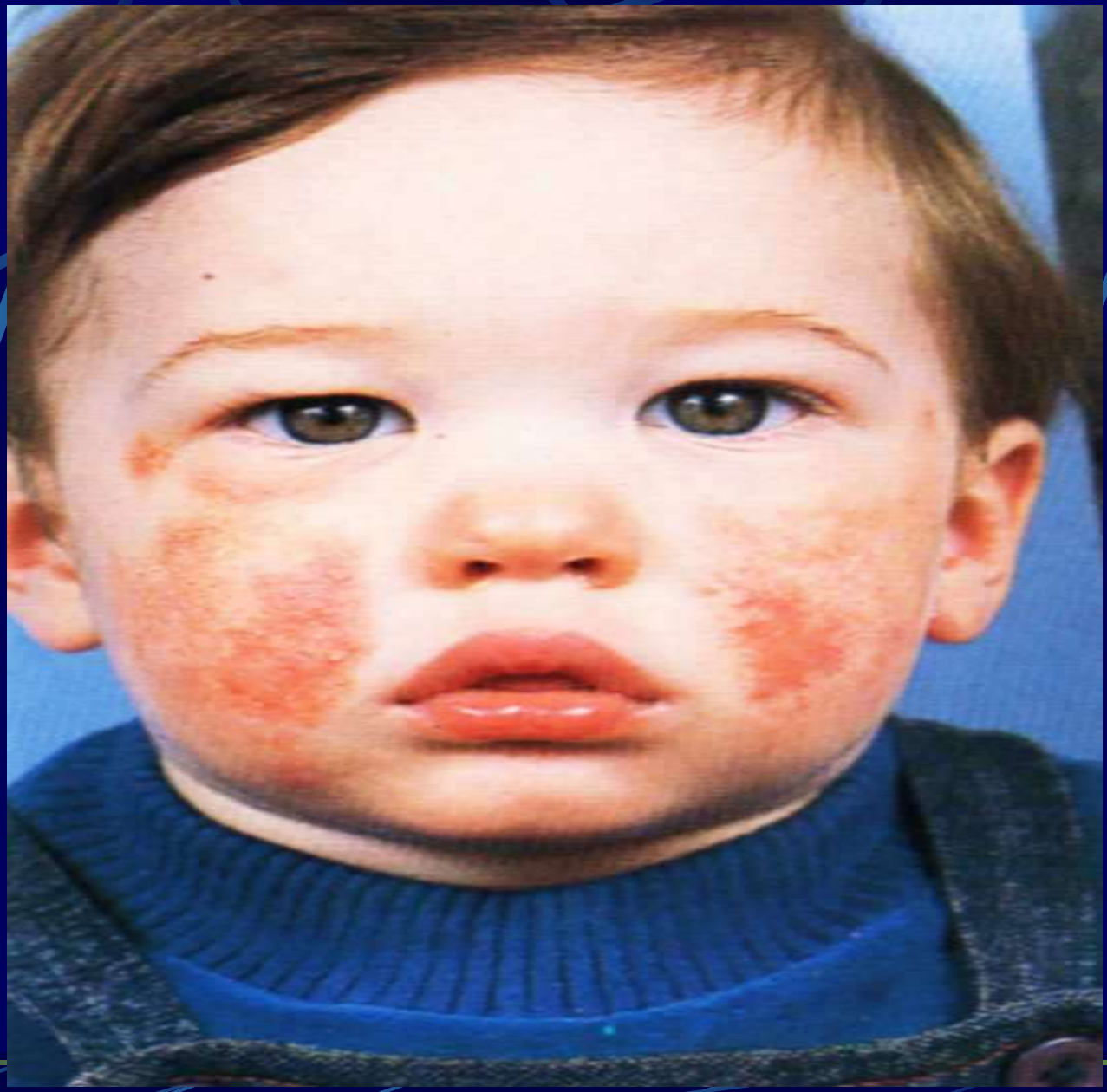
It is an itchy, relapsing inflammatory skin condition, frequently associated with other atopic condition (asthma, hay fever,and atopic dermatitis) in the individual or other family members

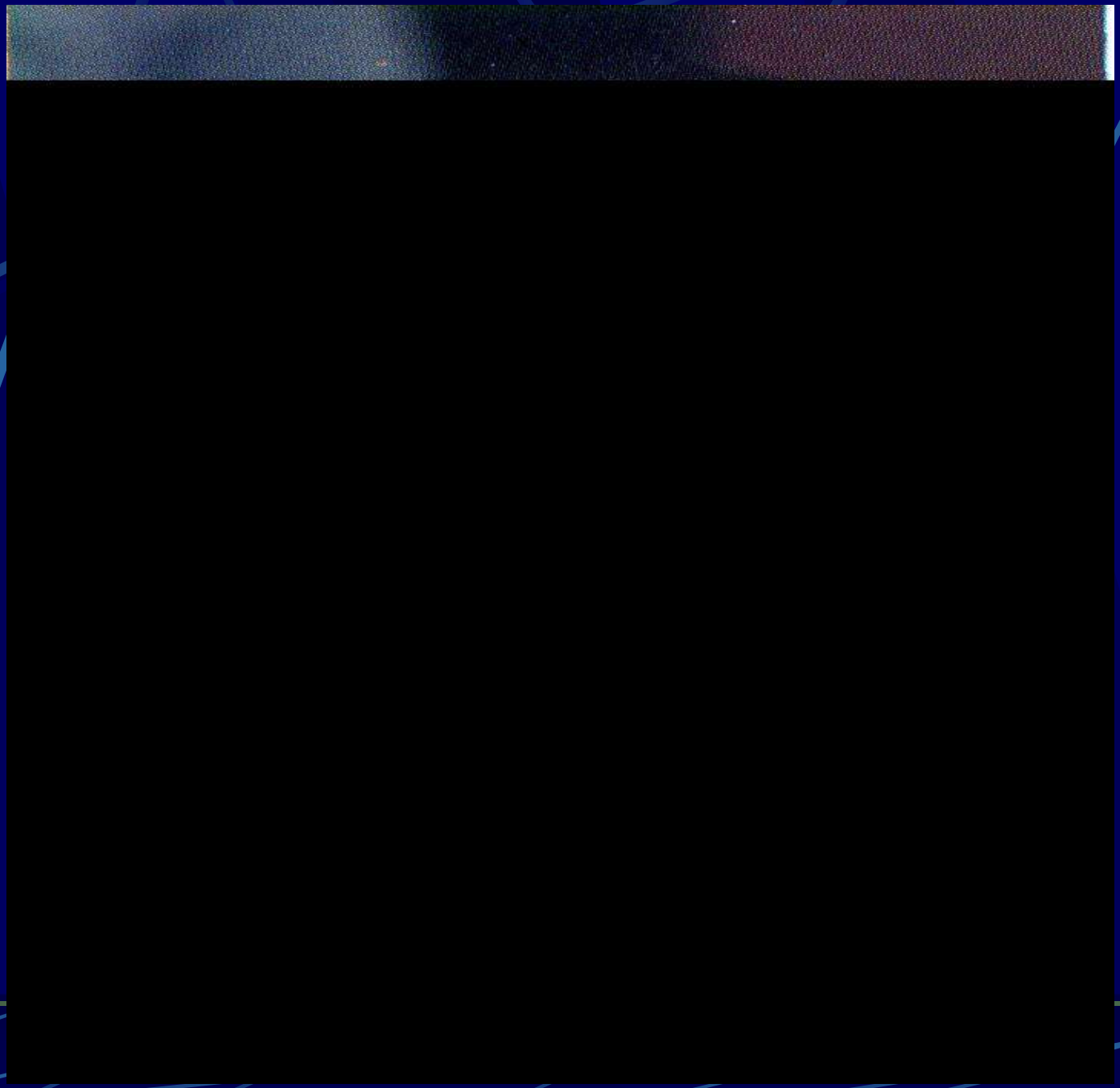
Clinical picture:

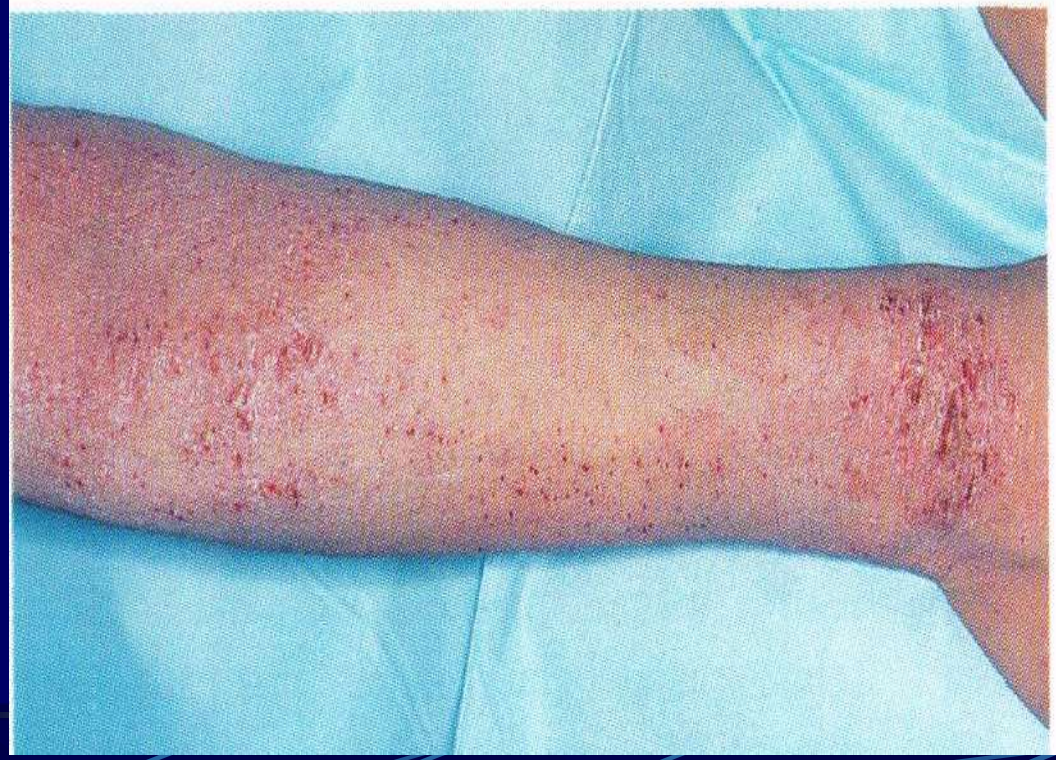
** Infantile phase (2 months – 2 years)*

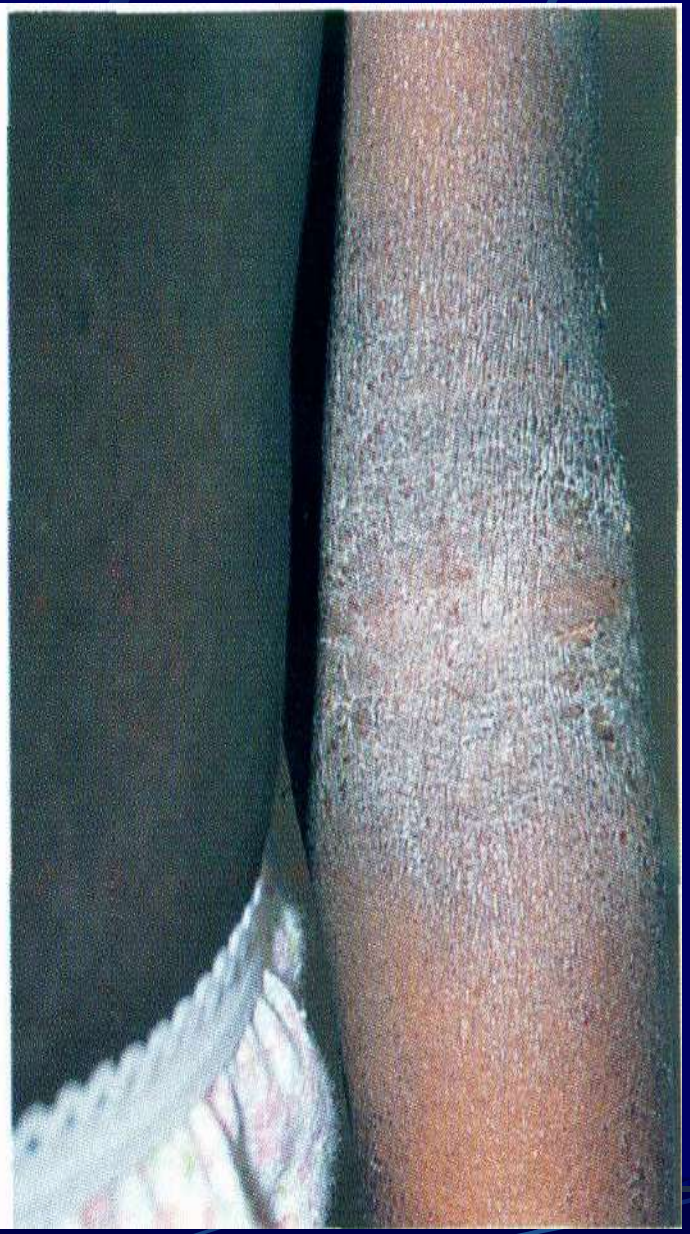
** Childhood phase (2 –12 years)*

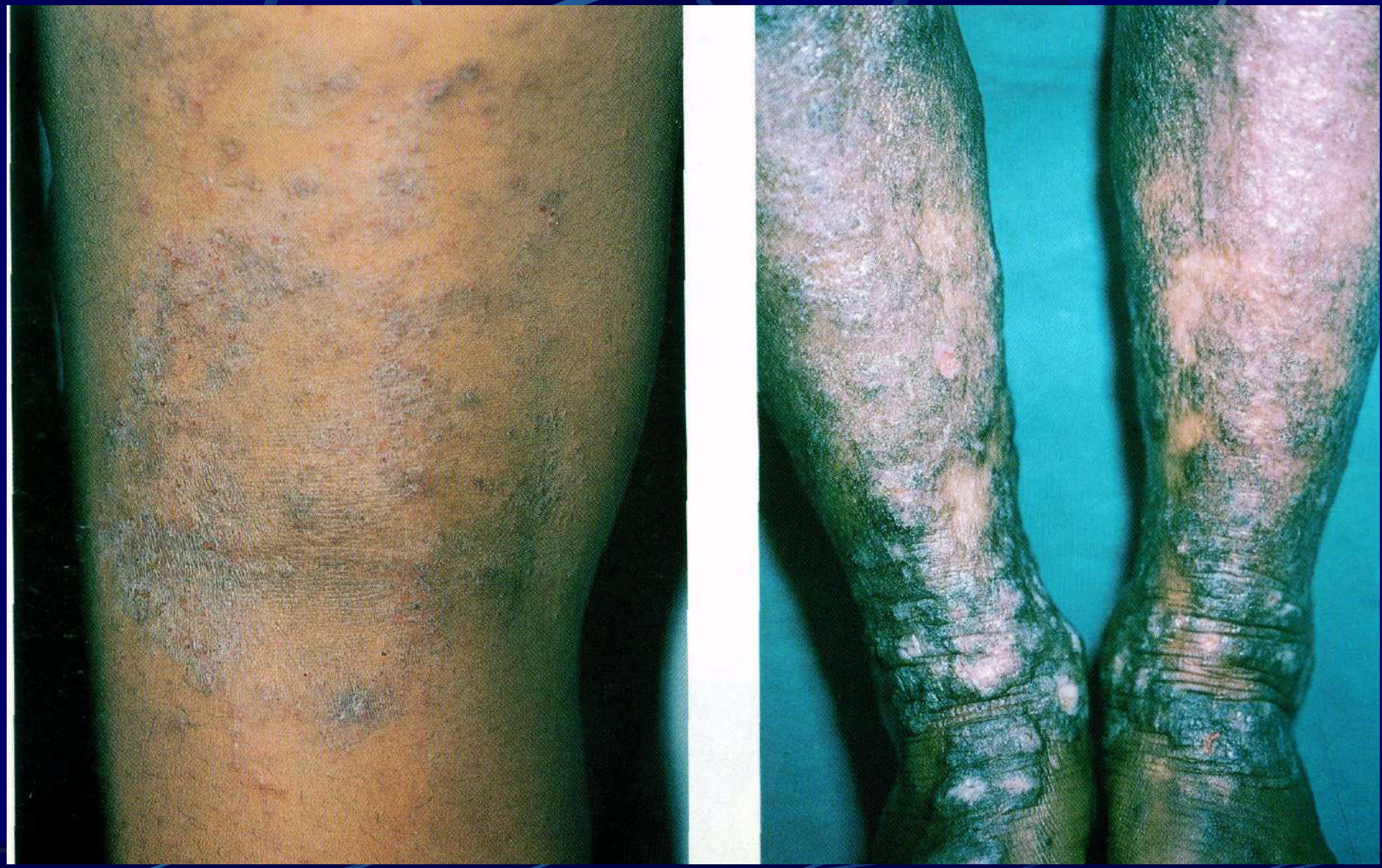
** Adult phase (12 years and more)*











Treatment of atopic dermatitis:

* *Reduction of trigger factors as soap and detergents wool, some foods and stress*

* *Bath oils and applications of emollients*

* *Topical steroid*

* *Systemic steroid*

Infective dermatitis

It is eczema which is caused by microorganisms or their products, and which clears when the organisms are eradicated

Often it develops about a discharging abscess, sinus, or ulcer as an area of erythema with microvesicles

Treatment:

Treatment of infection in addition to treatment of eczema

Seborrhoeic dermatitis

Definition :

It is a chronic dermatitis, which has a red sharply marginated lesions covered with greasy scales and distributed in areas with a rich supply of sebaceous glands namely the scalp, face and upper trunk

Etiology:

The yeast Malassezia furfur may have a role

Clinical picture:

** Dandruff :*

Visible desquamation from the scalp surface

** Seborrhoeic dermatitis:*

- Commonly originates in hairy skin ,and involves the scalp, face, presternal and interscapular regions and the flexures

- The lesions tend to be dull or yellow red in color and covered with greasy scales

- The lesions may be generalized , with erythema, scaling, oozing and pruritus and may progress to erythroderma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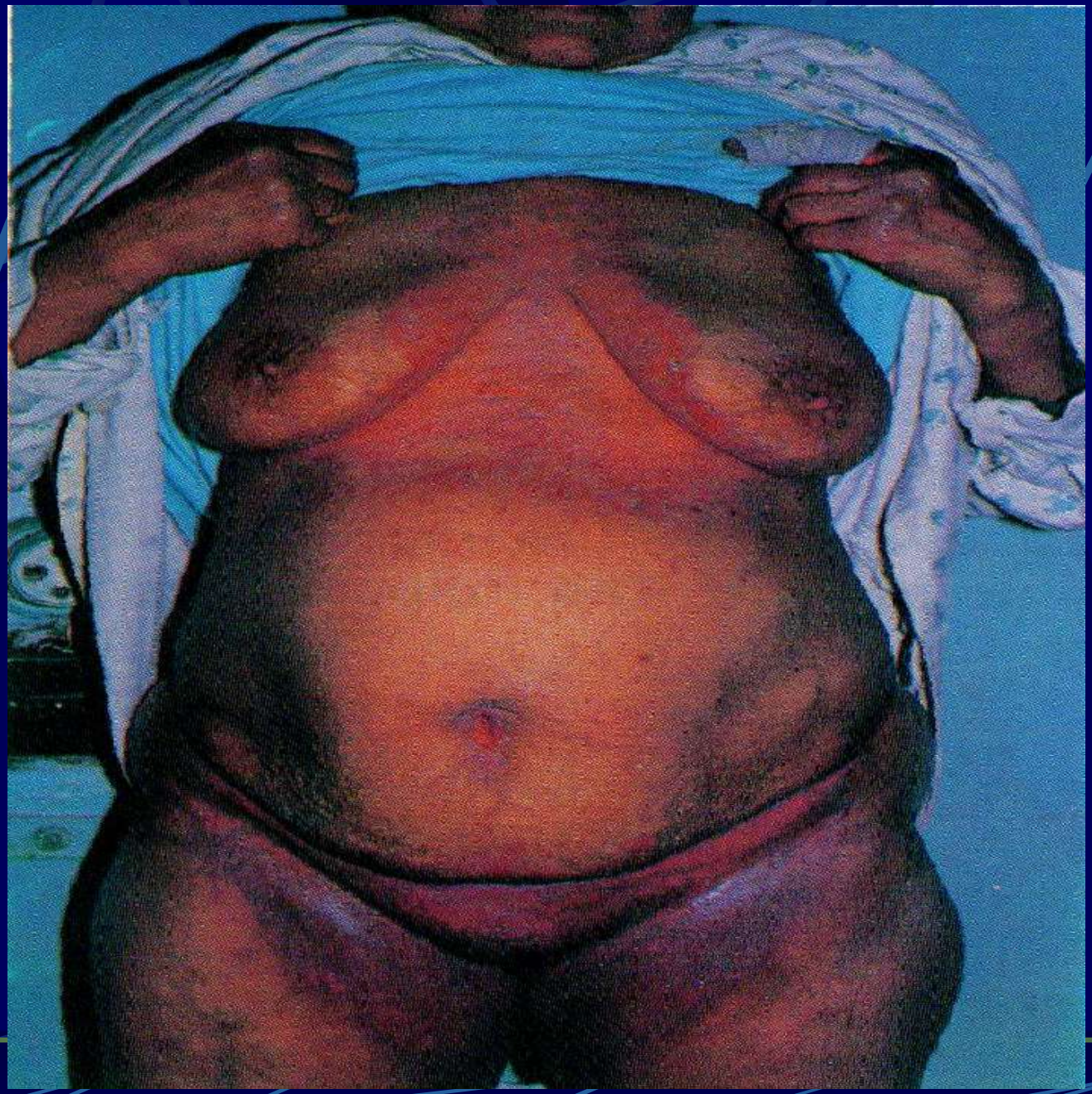

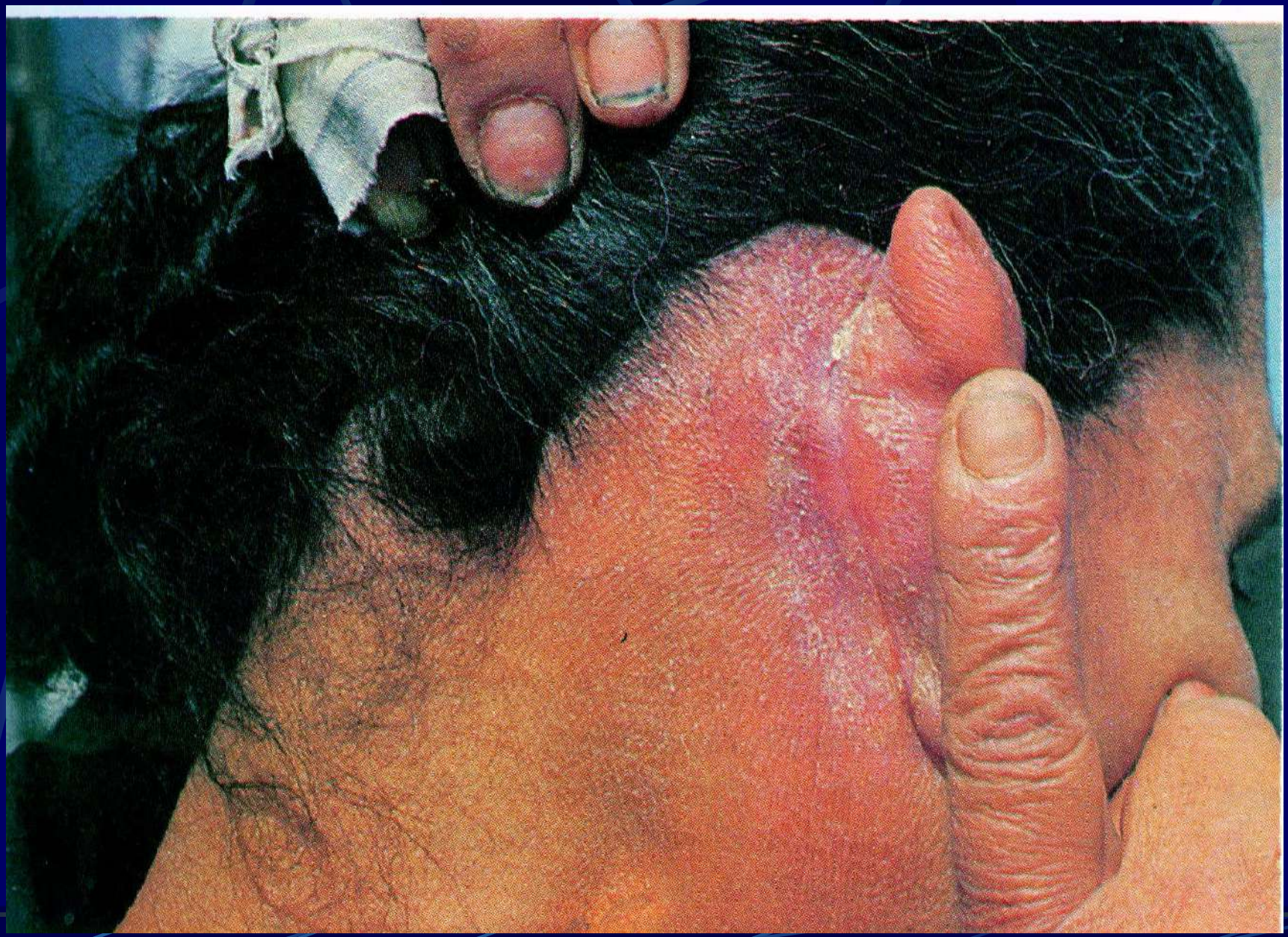

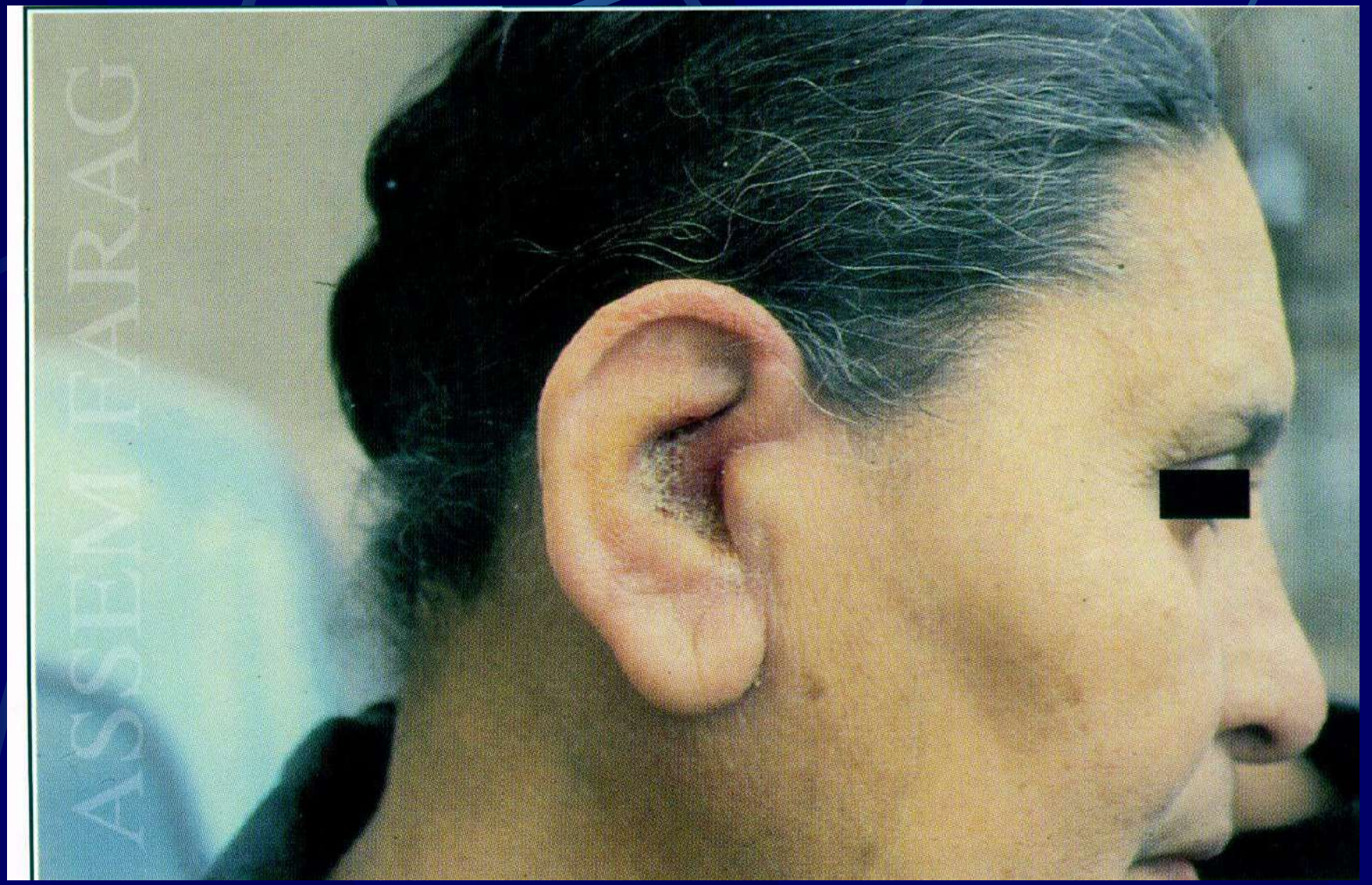
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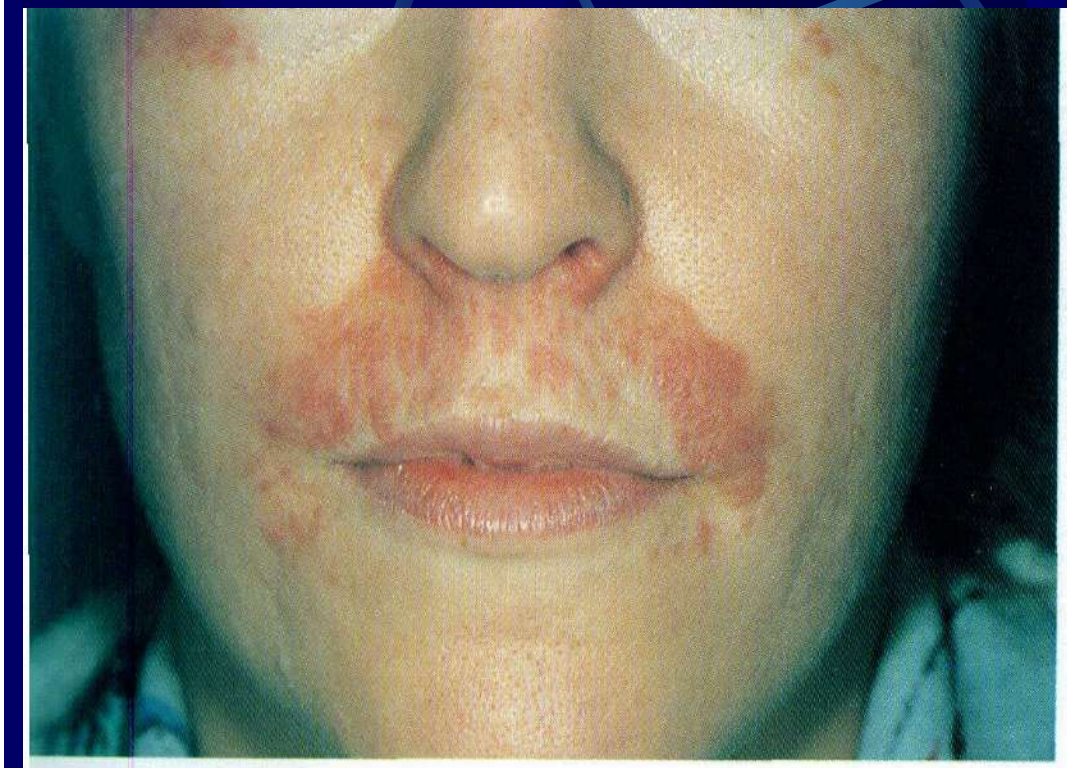

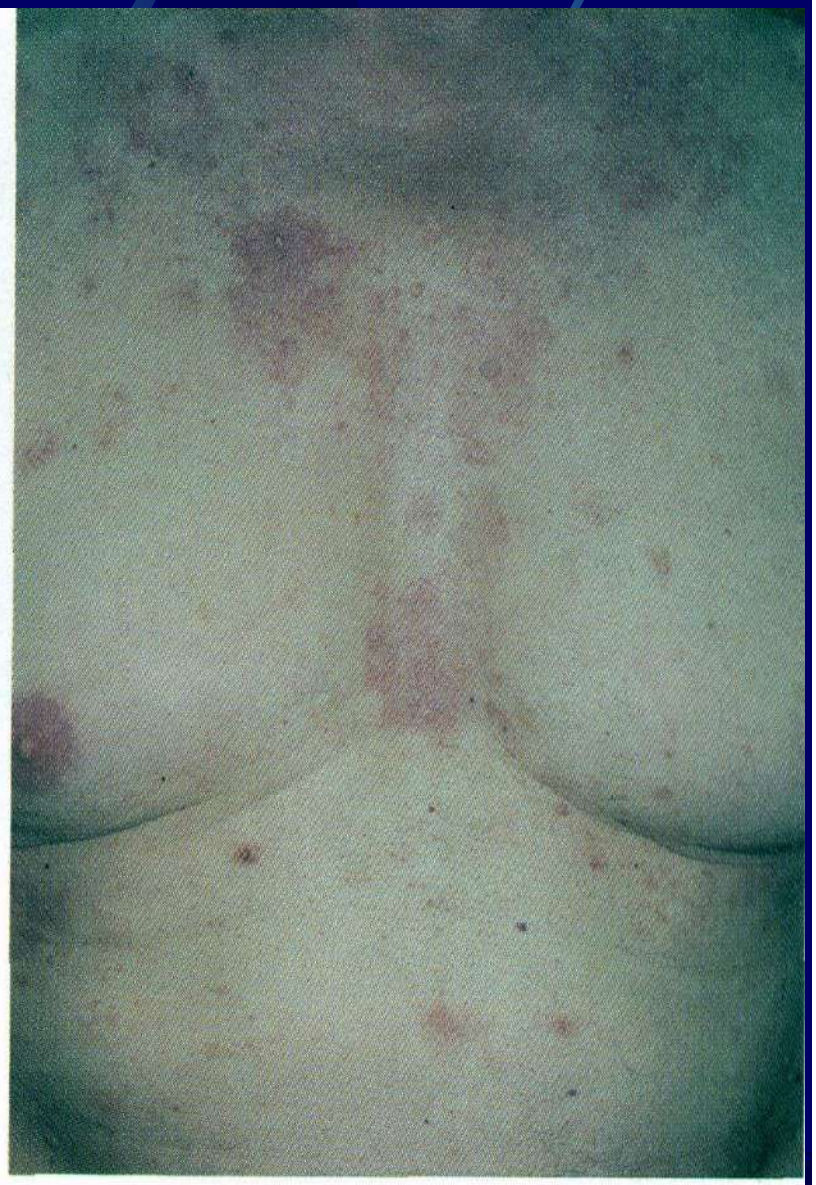

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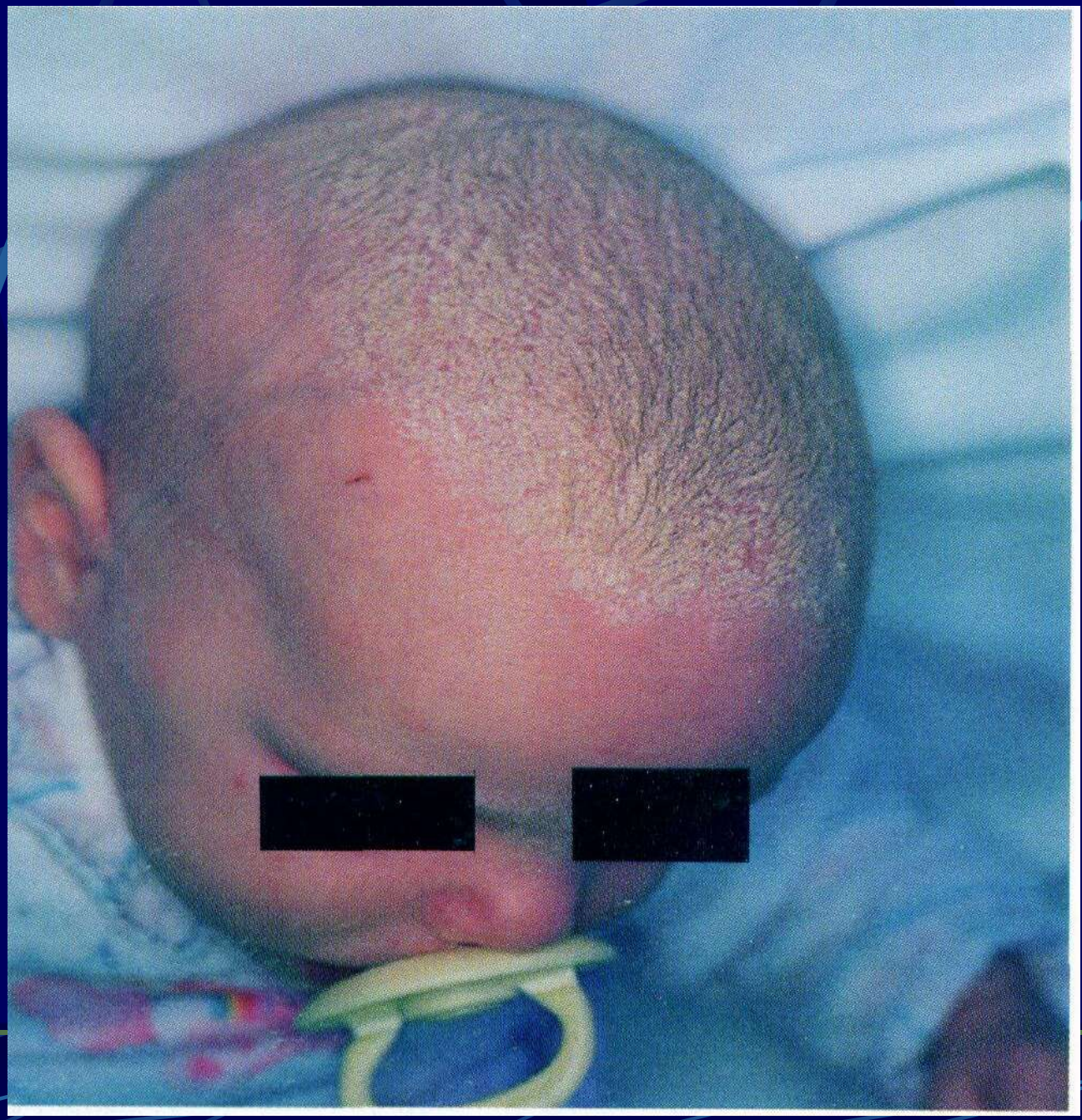
B, Seborrheic dermatitis. Erythema with "greasy"-looking scale a seborrheic distribution (scalp, eyebrows, nasolabial fold, peri- ıl area, midchest, and groin).



Treatment Seborrhoeic dermatitis:

** Dandruff is usually treated by medicated shampoos as ketokonazole and selenium sulphide shampoos*

** Seborrhoeic dermatitis of glabrous skin is treated as eczema*

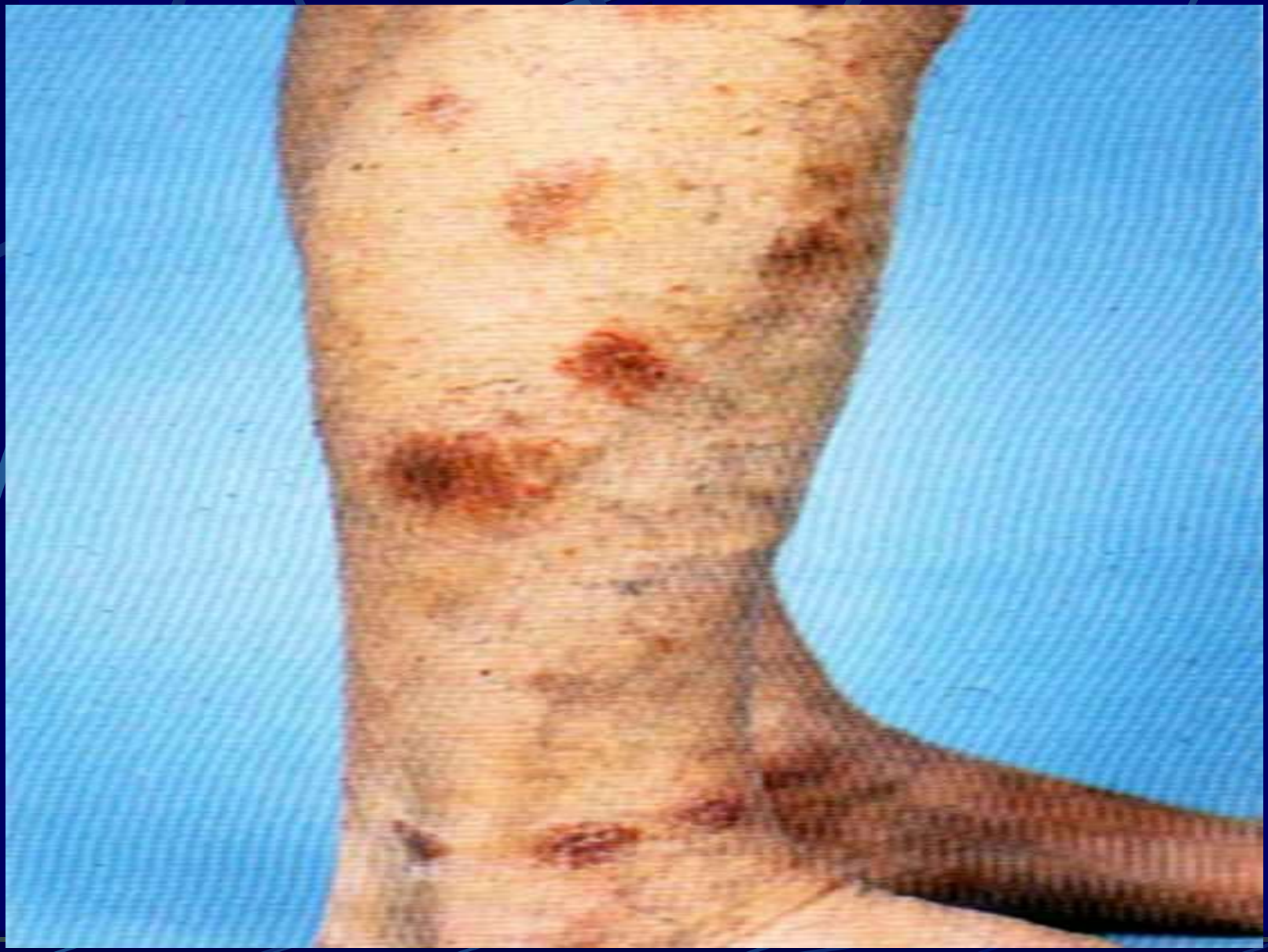
Discoid eczema

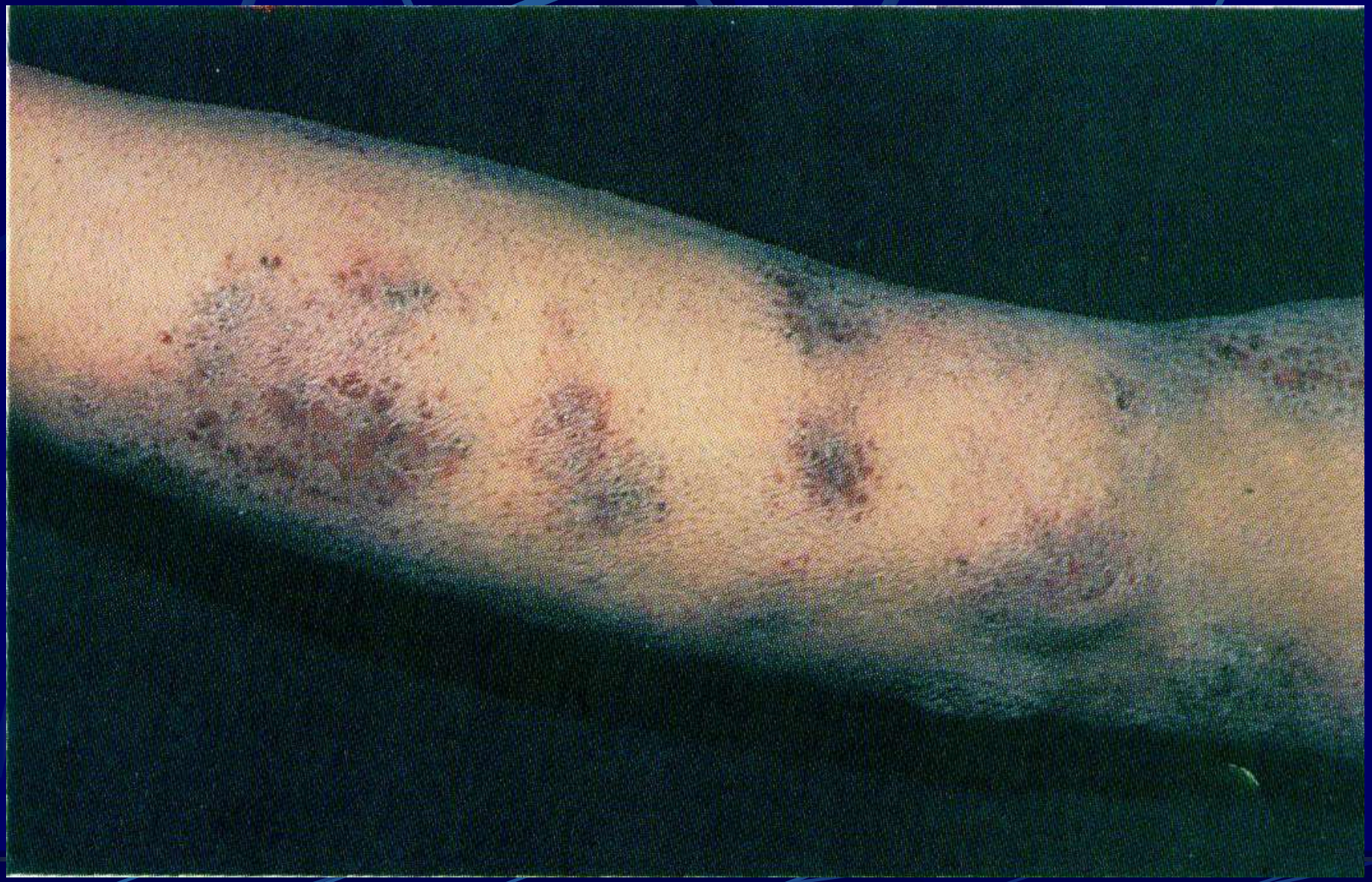
It is a coin- shaped plaque of closely set, thin-walled vesicles on an erythematous base

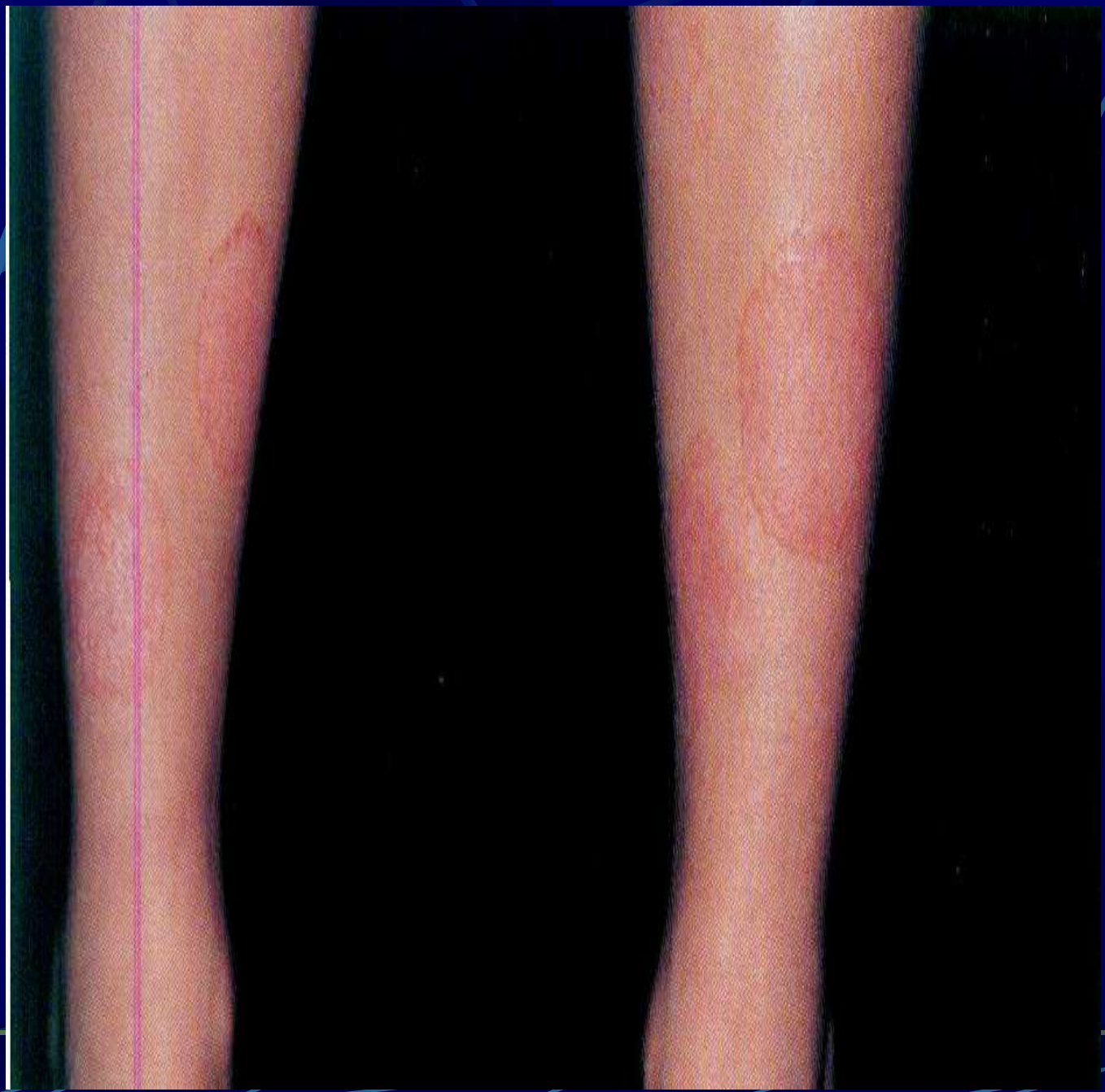
Itching is usually severe

Middle aged men are most frequently affected

It usually begins on the lower legs, dorsa of hands, or extensor surfaces of the arms





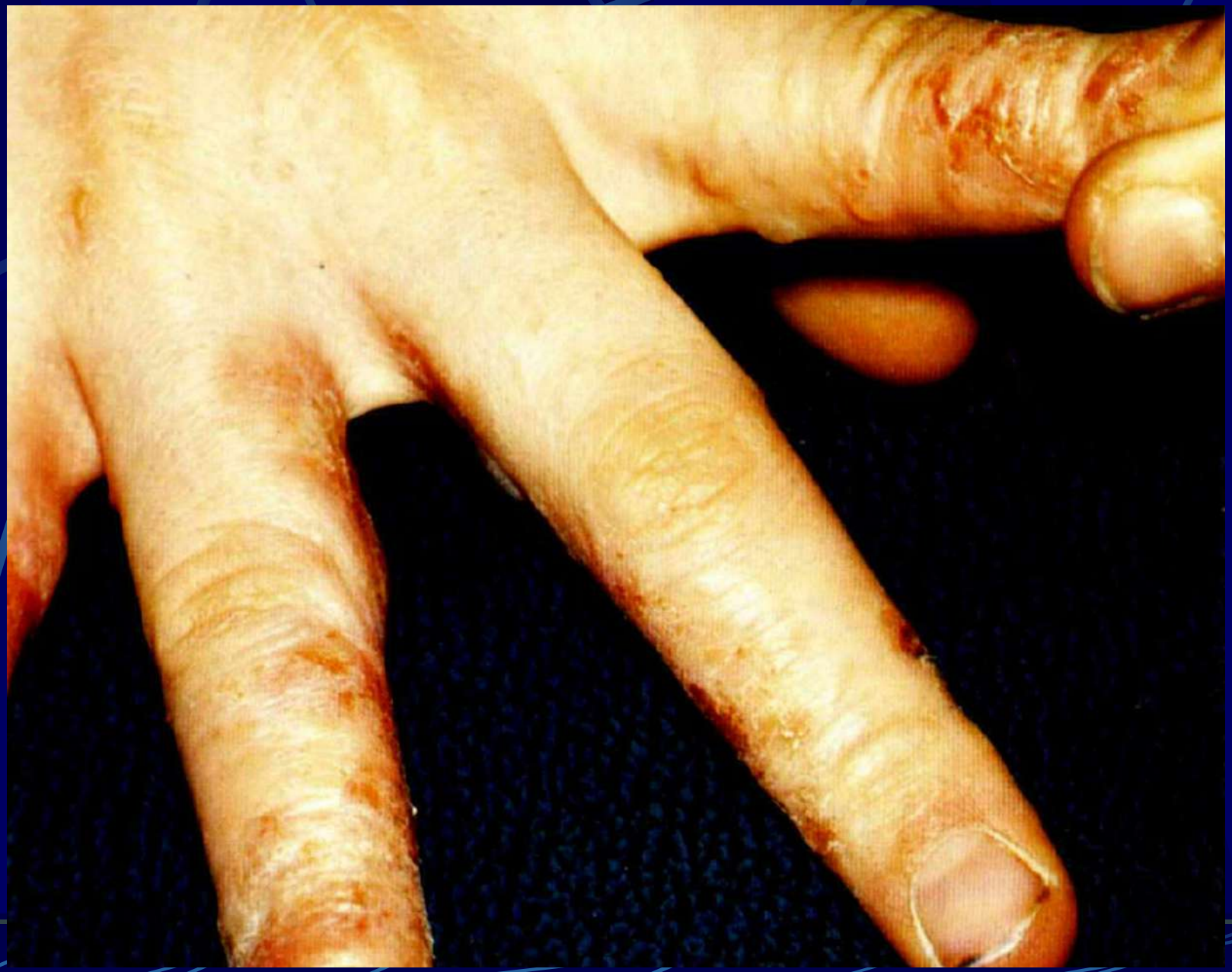


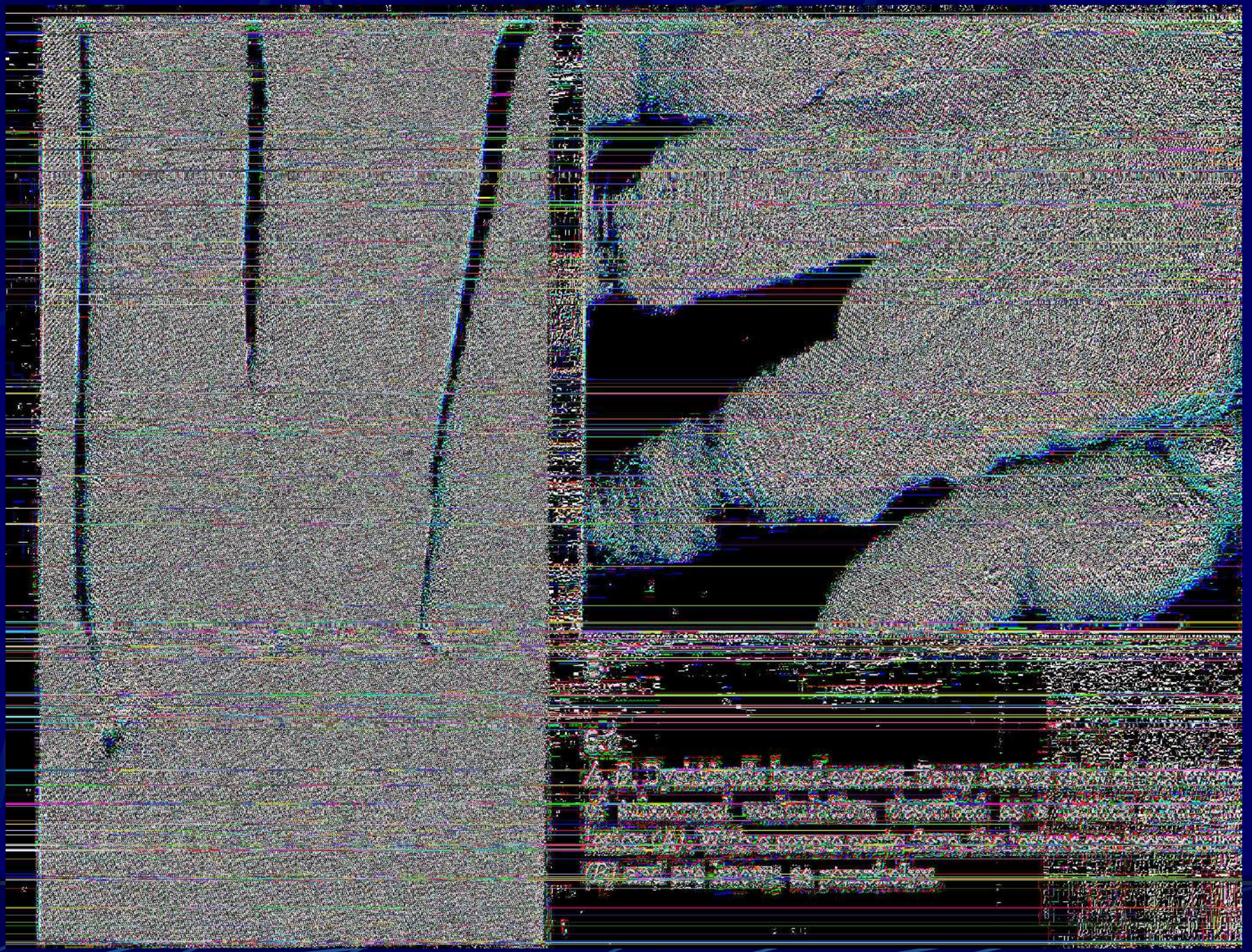
Pompholyx

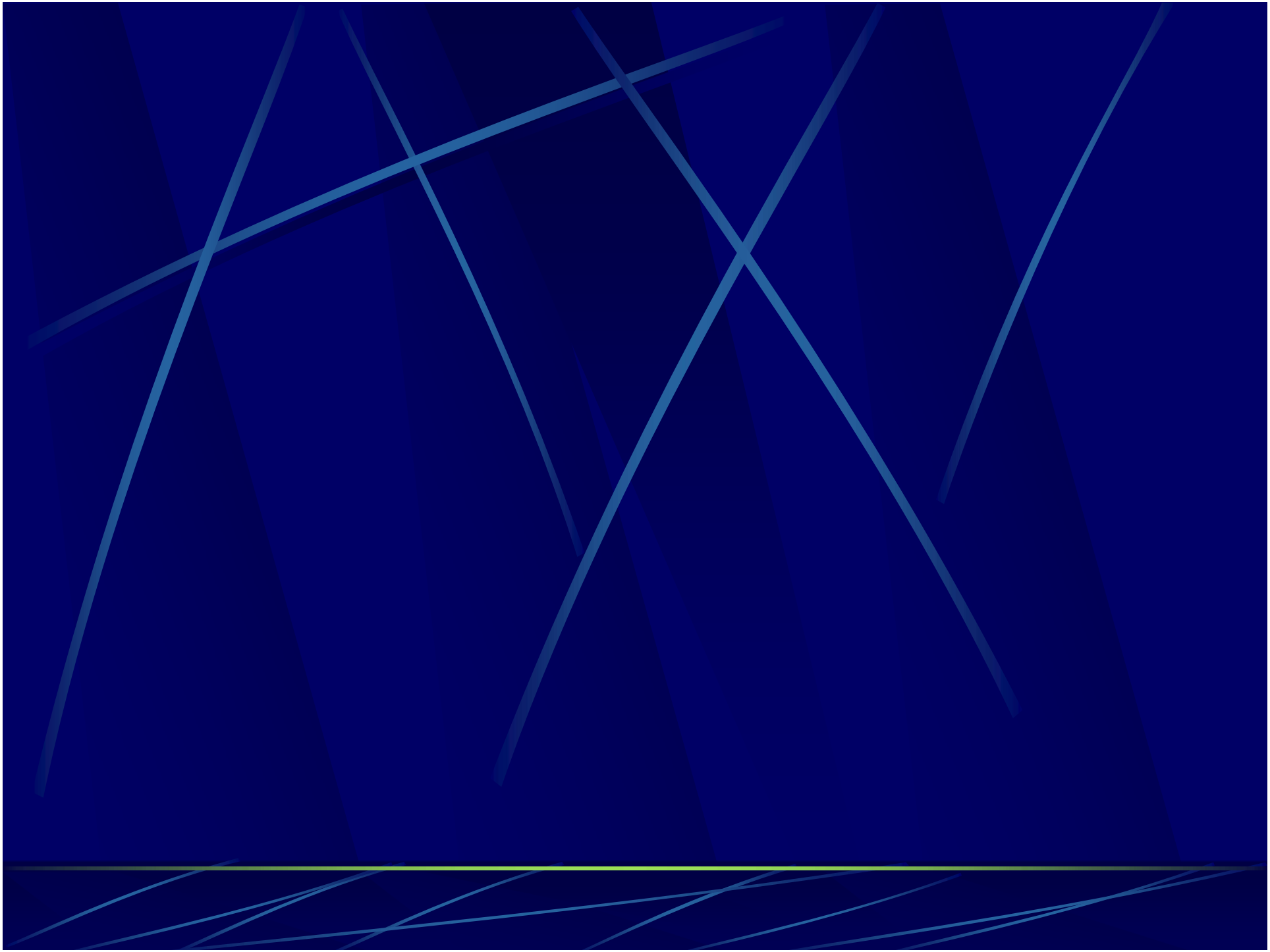
* *Sudden onset of crops of clear vesicles, which appear deeply seated on the palms and soles*

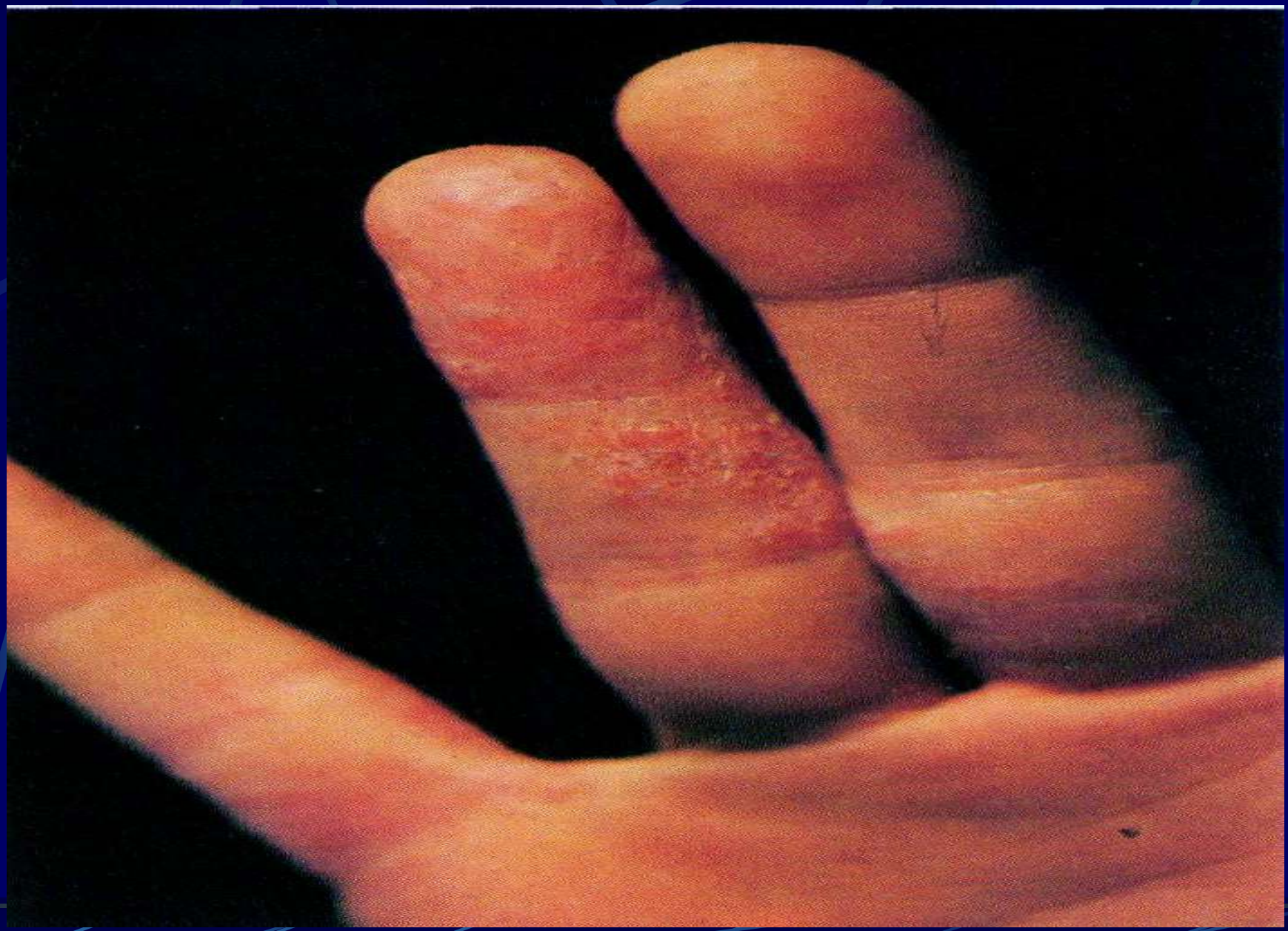
* *Itching may be severe*

* *The attack subsides spontaneously, and resolution with desquamation occurs in 2-3 weeks*







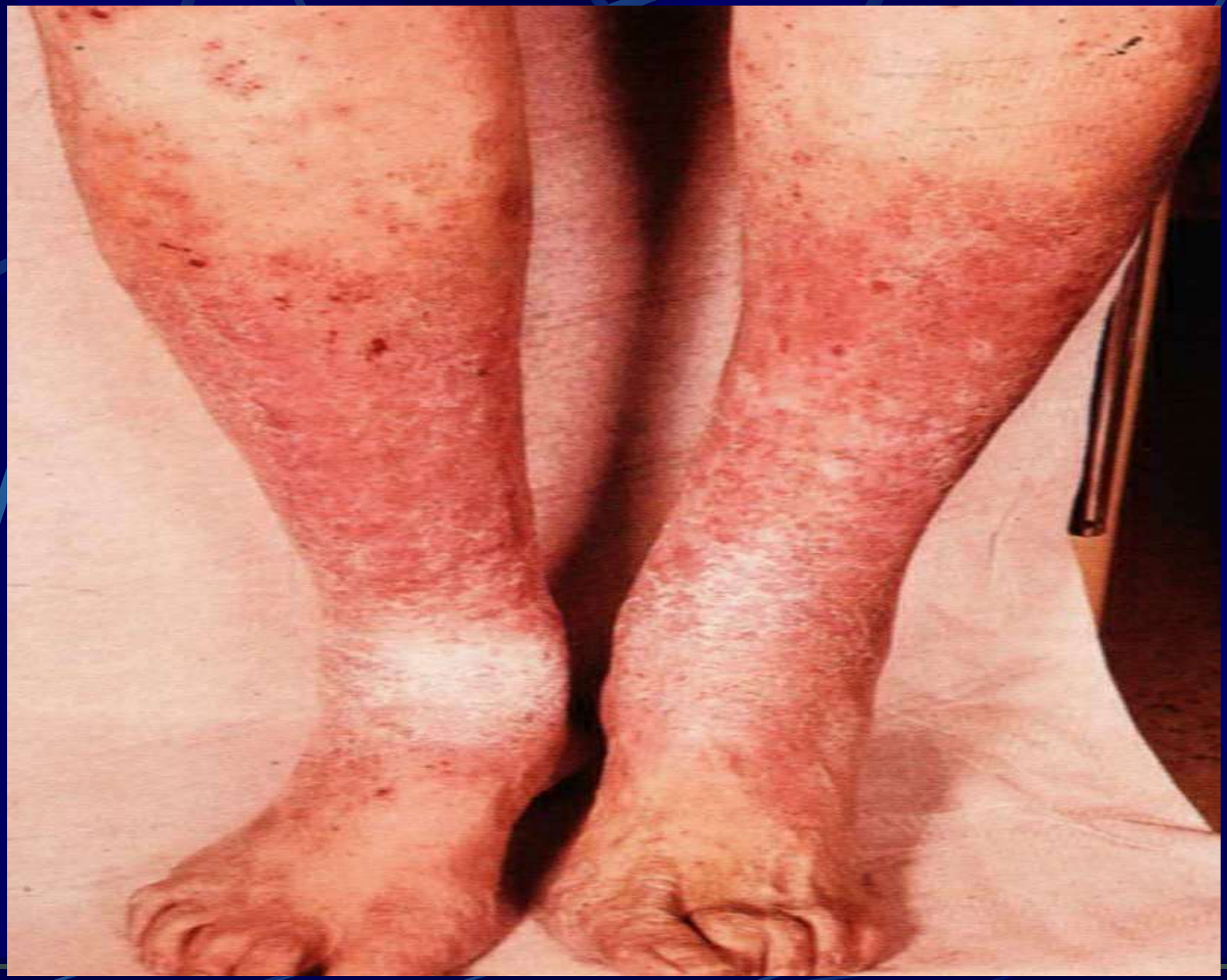


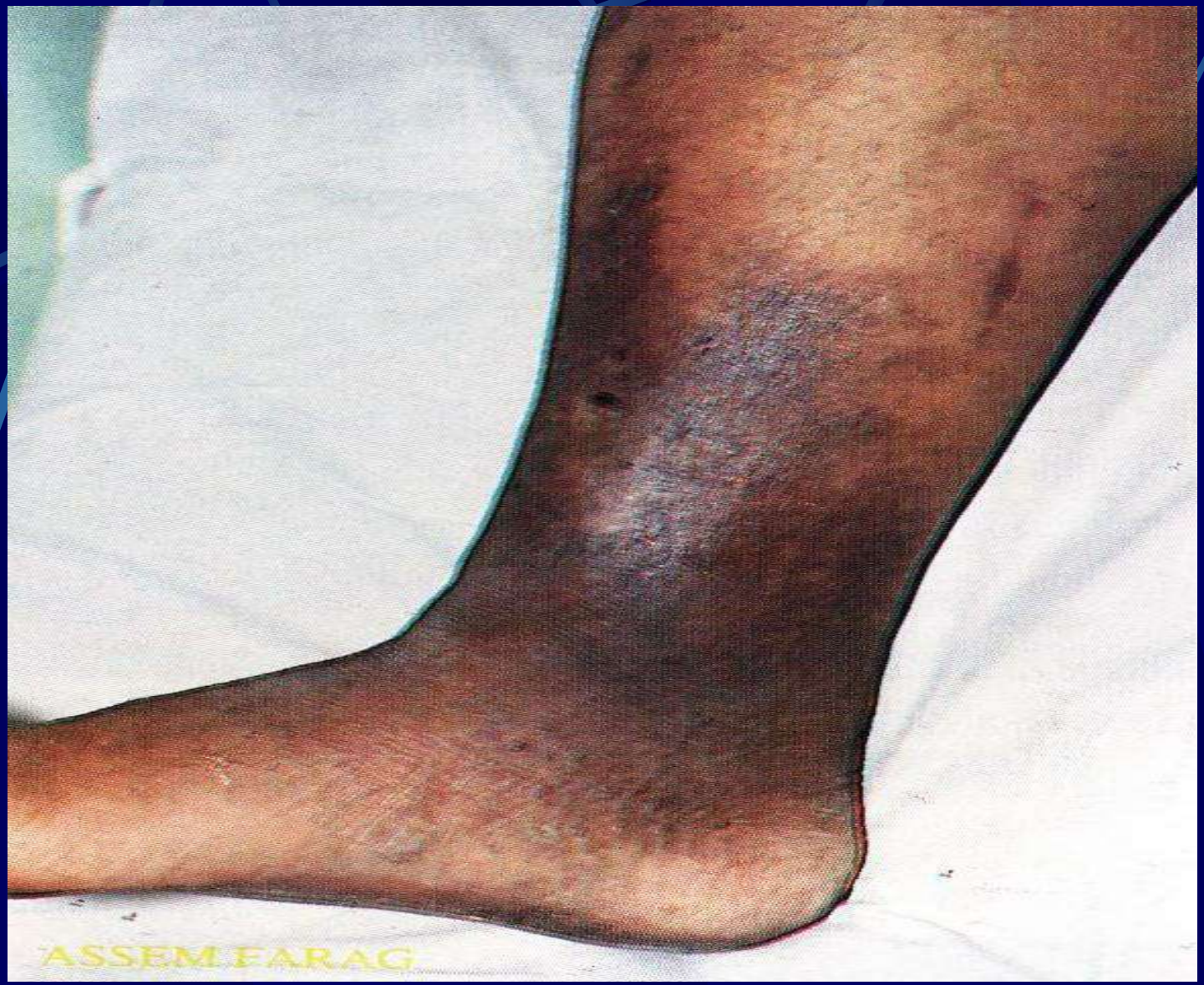
Gravitational eczema

** It is commonly secondary to venous hypertension, usually occurs in the lower leg*

** It affects mainly middle- aged or elderly females*

** It usually accompanied by other manifestations of venous hypertension, including varicosity, edema, purpura, hemosiderosis and ulceration*

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