

## Ditch the itch! Allergic contact dermatitis

When we think of “typical” allergy symptoms, sniffing, sneezing, itchy nose and eyes, and wheezing usually come to mind. But certain allergens can cause very different symptoms—particularly a nasty, itchy rash—when they come into direct contact with the skin. This condition, called allergic contact dermatitis, can be triggered in sensitive individuals by a wide variety of substances, such as poison ivy, nickel and certain other metals, rubber or latex, topical medications, detergents, cosmetics, and perfumes, to name a few.

The inflammation associated with allergic contact dermatitis is caused by lymphocytes (a type of white blood cell) entering the skin to attack and eliminate a substance that the body’s immune system perceives to be a harmful invader. “One becomes sensitized when the offending agent makes direct contact with the skin. Sensitivity is delayed, so the rash typically appears 24 to 48 hours later. The inflammation most commonly looks like a red, raised, very itchy rash with blister-like papules, which may weep. These lesions tend to appear in patches but may occur in a line,” explains board-certified allergist Dr. David Hunter.

Poison ivy, which triggers allergic contact dermatitis in 20 to 30 percent of the population, would seem to be a problem that is limited strictly to the warm growing season, but Dr. Hunter cautions that people frequently come into contact with poison ivy at this time of year when they’re doing fall cleanup. For people who burn their yard waste, poison ivy can cause problems, as well. When poison ivy vines are burned, the oil responsible for the unpleasant allergic reaction, called urushiol, can enter the air in the smoke, which can irritate the lungs, eyes, or any exposed skin. It’s also important to note that certain substances can cross react with poison ivy, such as the skin of mango fruit and raw cashew shells.

Poison ivy is found in most of the US east of the Rocky Mountains and is widespread in Northwest Ohio. The plant is green in color and grows either as a small shrub or vine, which often climbs up trees or telephone poles. Young plants closely resemble maple tree seedlings. “Some good warnings to heed with respect to poison ivy include, ‘Leaflets three, let it be,’ ‘Hairy vine, no friend of mine,’ and ‘Berries white, run with fright,’” says Dr. Hunter.

Since there are many substances that can trigger allergic contact dermatitis, allergists may have to do a bit of detective work to identify the culprit in each case. In many instances, the location of the rash on the body can provide a good clue as to the cause. According to Dr. Hunter, metal, such as nickel or cobalt (the two most common metal allergens), is the easiest offending agent to identify. Nickel, for example, is frequently used in inexpensive jewelry, so the rash commonly develops right where the necklace, earring, watch, belt buckle, etc. touches the skin. Similarly, if a medical professional develops contact dermatitis on his or her hands, allergy to the natural rubber latex, which has long been used to manufacture disposable medical gloves, would be a good lead for the allergist to follow.

There is no cure for allergic contact dermatitis, so avoidance of known or suspected allergens is key. “If you’ve made contact with poison ivy, immediately scrub the affected site with hot, soapy water to get the oil off your skin,” Dr. Hunter advises. “Also, be sure to wash any affected clothing—work gloves, shirt, pants, socks, etc.—to prevent the oil from being transferred to your skin or someone else’s skin. The same applies to any tools that might have come into contact with poison ivy. Contrary to popular belief, however, the rash will not spread from one affected site on your body to another site. Nor will it spread from one person’s skin to another’s.”

Treatment may include the use of a topical steroid cream or oral or injectable steroids. The intense itch associated with the rash can be reduced with antihistamines (e.g., Benadryl) as well as with calamine lotion, Burrow's solution, or an oatmeal bath or soak. There is no test your allergist or dermatologist can perform to determine whether or not you are sensitive to poison ivy. However, patch tests, in which various allergens are applied to the skin and held in place with a patch, are available for common chemicals and metals known to cause contact dermatitis.

Dr. Hunter also notes that not all cases of contact dermatitis are triggered by an allergen. In many instances, a substance or chemical simply irritates the skin, causing an itchy rash. Cement is one example of a common substance known to cause non-allergic (i.e., not involving an immune response) contact dermatitis in many people. But with a little sleuthing and, potentially, testing, your allergist can help determine the right cause and initiate appropriate treatment to help you "ditch the itch."

Dr. David Hunter

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