

# **Occupational Dermatology Pearls and Pandemic Related Occupational Skin Disease**

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# Learning objectives

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- Identify common allergens causing occupational allergic contact dermatitis (OACD)
- Recognize different presentations of OACD
- Learn practical approach to workup and management
- Review OACD in the context of pandemic related occupational skin disease

# Occupational Skin Disease (OSD)

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OSD accounts for more than 35% of all occupationally related disease

Annual est. cost >\$1 billion

- lost productivity, medical care, and disability payments

90% of occupational skin disease can be attributed to contact dermatitis

Significant emotional distress

Decreased quality of life

### Clinical classification of occupational dermatoses.

CLINICAL CLASSIFICATION OF OCCUPATIONAL DERMATOSES
Contact dermatitis
<ul style="list-style-type: none"><li>• Irritant<ul style="list-style-type: none"><li>- chemically induced</li><li>- photoinduced</li><li>- mechanical</li></ul></li><li>• Allergic</li></ul>
Chemical burn
Contact urticaria
Cancer
<ul style="list-style-type: none"><li>• Sunlight/UV-induced</li><li>• Ionizing radiation-induced</li><li>• Chemically induced</li></ul>
Follicular disease
<ul style="list-style-type: none"><li>• Acne</li><li>• Folliculitis</li><li>• Chloracne</li></ul>
Autoimmune connective tissue disease
<ul style="list-style-type: none"><li>• Systemic sclerosis (silica; see <a href="#">Ch. 43</a>)</li><li>• Scleroderma-like (vinyl chloride, organic solvents; see <a href="#">Ch. 43</a>)</li><li>• Vibration-induced</li></ul>
Pigmentary disorders
<ul style="list-style-type: none"><li>• Hypopigmentation (see <a href="#">Ch. 66</a>)</li><li>• Hyperpigmentation (see <a href="#">Ch. 67</a>)</li></ul>
Foreign body reactions (see <a href="#">Ch. 94</a> )
Infection
<ul style="list-style-type: none"><li>• Viral</li><li>• Bacterial</li><li>• Fungal</li><li>• Parasitic</li></ul>

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## High risk occupations

- Health care workers
- Hairdressers
- Cosmetologists
- Butchers
- Cooks
- Florists
- Machinists
- Mechanics
- Construction workers

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## High risk exposures

- Wet work including frequent hand washing
- Irritating and sensitizing chemicals
- Mechanical friction and trauma
- PPE use (ex. nitrile and latex gloves, face masks, scrubs, gowns, etc.)

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## History

- ☐ What exactly does patient do in his/her job?
- ☐ Protective gloves/gear?
- ☐ What materials does patient use?
  - Oils? Metals? Epoxies? Acrylates?
- ☐ New product or new procedure in the workplace?
- ☐ Cleansers? Skin protectants (creams) used?
- ☐ Other workers affected?
- ☐ Better on weekends/vacations?
- ☐ Recreational exposures?
- ☐ Check Safety Data Sheets
- ☐ Literature search if necessary

# Mathias criteria for diagnosis of Occupational Contact Dermatitis

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- 1) Appearance?
- 2) Exposure?
- 3) Distribution ?
- 4) Temporal relationship?
- 5) Non occupational sources excluded?
- 6) Improvement away from work?
- 7) Patch tests + ?

**4/7 needed to establish diagnosis of OCD**



# Sample allergen categories



Metals



Fragrances



Rubber Additives



Medicaments



Preservatives



Dyes/Vehicles



Resins/Adhesives



Plants

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## T.R.U.E. TEST Allergen Information

Each T.R.U.E. TEST patch test unit contains Panel 1.3, 2.3 and 3.3, and includes 35 common allergens and a negative control.

Panel 1.3
Nickel Sulfate
Wool Alcohols
Neomycin Sulfate
Potassium Dichromate
Caine Mix
Fragrance Mix
Colophony
Paraben Mix
Negative Control
Balsam of Peru
Ethylenediamine Dihydrochloride
Cobalt-Dichloride

Panel 2.3
p-tert-Butylphenol Formaldehyde Resin
Epoxy Resin
Carba Mix
Black Rubber Mix
CI+ Me- Isothiazolinone (MCI/MI)
Quaternium-15
Methyldibromo Glutaronitrile
p-Phenylenediamine
Formaldehyde
Mercapto Mix
Thimerosal
Thiuram Mix

Panel 3.3
Diazolidinyl Urea
Quinoline Mix
Tixocortol-21-Pivalate
Gold Sodium Thiosulfate
Imidazolidinyl Urea
Budesonide
Hydrocortizone-17-Butyrate
Mercaptobenzothiazole
Bacitracin
Parthenolide
Disperse Blue 106
Bronopol

# North American Contact Dermatitis Group (NACDG) Standard Series- 80 allergens

1. B-004 Benzocaine	21. D-044C DIAZOLIDINYL UREA	41. T-010 Toluenesulfonamide formaldehyde resin	61. D-057 Desoximetasone
2. M-003B 2-Mercaptobenzothiazole (MBT)	22. T-036 TOCOPHEROL	42. M-013 Methyl methacrylate	62. P-013 POLYSORBATE 80
3. C-020 COLOPHONIUM	23. B-032B Bacitracin	43. C-017A Cobalt(II)chloride hexahydrate	63. I-008C IODOPROPYNYL BUTYLCARBAMATE
4. P-006 p-PHENYLENEDIAMINE (PPD)	24. Mx-24 Mixed dialkyl thiourea	44. T-031A Tixocortol-21-pivalate	64. O-004 2-n-Octyl-4-isothiazolin-3-one
5. I-001A IMIDAZOLIDINYL UREA	25. D-032 DISPERSE ORANGE 3	45. B-033A Budesonide	65. Mx-26 Disperse Blue mix 106 / 124
6. C-014 CINNAMAL	26. Mx-03A Paraben mix	46. C-019 COCAMIDE DEA	66. Mx-29A Compositae mix II
7. A-004 Amerchol L-101	27. D-049E METHYLDIBROMO GLUTARONITRILE	47. T-016 TRIETHANOLAMINE	67. L-002B Lidocaine
8. Mx-06 Carba mix	28. Mx-07 Fragrance mix I	48. Mx-30 Textile dye mix	68. F-003 Fusidic acid sodium salt
9. N-001 Neomycin sulfate	29. G-003B GLUTARAL	49. T-035B Tea Tree Oil oxidized	69. D-005B Dibucaine hydrochloride
10. Mx-01 Thiuram mix	30. B-015B 2-BROMO-2-NITROPROPANE-1,3-DIOL	50. Mx-25 Fragrance mix II	70. B-007 Benzoylperoxide
11. C-028 Clobetasol-17-propionate	31. Mx-18 Sesquiterpene lactone mix	51. D-036 Disperse Yellow 3	71. I-009 ISOAMYL p-METHOXYCINNAMATE
12. E-005 Ethylenediamine dihydrochloride	32. T-007 THIMEROSAL	52. B-010B BENZYL SALICYLATE	72. L-003 HYDROXYISOHEXYL 3-CYCLOHEXENE CARBOXALDEHYDE
13. E-002 Epoxy resin, Bisphenol A	33. P-022 Propolis	53. D-065 DECYL GLUCOSIDE	73. O-007A ETHYLHEXYL SALICYLATE
14. C-007B QUATERNIUM-15	34. H-014C BENZOPHENONE-3	54. M-035B METHYLISOTHIAZOLINONE	74. H-031A Hydroperoxides of Linalool
15. B-024 4-tert-Butylphenolformaldehyde resin (PTBP)	35. C-010B CHLOROXYLENOL (PCMX)	55. H-010 2-Hydroxyethyl methacrylate	75. A-029 Amidoamine
16. Mx-05B Mercapto mix	36. Mx-16 Ethyleneurea, melamine formaldehyde mix	56. D-047B DMDM HYDANTOIN	76. C-018 COCAMIDOPROPYL BETAINE
17. D-022 1,3-Diphenylguanidine	37. B-022 2-tert-Butyl-4-methoxyphenol (BHA)	57. Y-001 Ylang ylang oil	77. F-002B FORMALDEHYDE
18. P-014B Potassium dichromate	38. G-005A Gold(I)sodium thiosulfate dihydrate	58. B-008B BENZYL ALCOHOL	78. C-009B METHYLISOTHIAZOLINONE+ METHYLCHLOROISOTHIAZOLINONE
19. B-001 Peru balsam	39. E-004 Ethyl acrylate	59. I-003 ISOPROPYL MYRISTATE	79. P-019B PROPYLENE GLYCOL
20. N-002B Nickel(II)sulfate hexahydrate	40. G-004 GLYCERYL THIOGLYCOLATE	60. H-032A Hydroperoxides of Limonene	80. O-005 OLEAMIDOPROPYL DIMETHYLAMINE



# North American Contact Dermatitis Group (NACDG)

## Patch Test Results 2019-2020; *N=4121*

### Top 5 Allergens

- Nickel sulfate (18.2%)
- Methylisothiazolinone (MI) (13.8%)
- Fragrance mix (FM) I (12.8 %)
- Linalool (11.1%)
- Benzisothiazolinone (10.4%)

### Top 6-11 Allergens

- (MCI/MI) (9%)
- Propolis (8.6%)
- Myroxylon Pereirae (balsam of Peru) (7.4%)
- Cobalt (7.3%)
- Formaldehyde (6.8%)
- Neomycin (6.3 %)

# Sample expanded series options

CHEMOTECHNIQUE  
DIAGNOSTICS

Home

About us

Contact Allergy








Patch Testing


**Products**

How to buy


Partner Page

Patch Test Products


Art.No	Cogc % (w/w), Vehicle	Name	Downloads
 B-1000		Bakery Series	
 C-1000		Cosmetic Series	
 CAD-1000		Cutaneous Adverse Drug Reaction Series	
 CS-1000		Corticosteroid Series	
 DMP-1000		Dental Materials - Patients	
 DMS-1000		Dental Materials - Staff	
 DS-1000		Dental Screening Series	

 E-1000


Epoxy Series

 ECB-1000


European Comprehensive Baseline Series

 F-1000


Fragrance Series

 H-1000


Hairdressing Series

 I-1000


Isocyanate Series

 ICB-1000


International Comprehensive Baseline Series

 IMP-1000


Implant Series

 IS-1000


International Standard Series

 LU-1000


Leg Ulcer Series

 MA-1000


(Meth) Acrylate Series - Adhesives, Dental, Printing & Other

 ME-1000


Medicament Series

 MET-1000

Metal Series










 METE-1000

Metal Series Extended

 MN-1000

(Meth) Acrylate Series - Nails

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	O-1000	Oil & Cooling Fluid Series
	PG-1000	Plastic & Glues Series
	PL-1000	Plant Series
	PP-1000	Photopatch Series
	R-1000	Rubber Additives Series
	S-1000	European Baseline Series
	SH-1000	Shoe Series
	SU-1000	Sunscreen Series
	TF-1000	Textile Colours & Finish Series

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# Allergic contact dermatitis

## Nickel

- Most common allergen
- Combined with other metals to enhance strength /durability
  - White gold, 14-carat yellow gold, chrome, silver, bronze, brass
- Often co-allergen along with chromium and cobalt- T.R.U.E. and NACDG



# Nickel Testing

- Dimethylglyoximine test kit
  - (Allerderm Ni kit)
  - (Delasco Nickel Spot Test)



**T.R.U.E. TEST**  
THIN-LAYER RAPID USE  
EPICUTANEOUS PATCH TEST

**NICKEL SULFATE**

## WHERE IS NICKEL FOUND?

*At work, you may find nickel in or around:*

- Metal alloys
- Copper-nickel tubing for salt water
- Machine parts
- Chemical catalysts
- Aluminum electrical joint compounds
- Equipment
- Orthodontic and dental appliances
- Welding and cutting
- Nickel plating
- Metal-working fluids and oils
- Batteries
- Dyes
- Insecticides



# Prevention / Treatment

- Avoidance
- Coat metal with clear nail polish
- NIK-L-BLOK Barrier Cream (metal ion chelator for nickel and cobalt)
- Avoid placing keys in the front pocket
- Controversial?: Nickel sensitive pts with hand and/or foot dermatitis may benefit from nickel free diet



**Go!**  
Low Nickel  
Content



MUSHROOM



CUCUMBER



BELL PEPPERS



CELERY



BRUSSELS  
SPROUTS



BROCCOLI



APPLES, ORANGES,  
& BANANAS



OLIVE OIL



SALMON



EGGS



SWISS CHEESE



CHICKEN  
BREAST



WHITE  
RICE



STEAK



SWEET POTATO



PLAIN BAGEL



**Stop!**  
High Nickel  
Content



KALE



LIMA BEANS



CHOCOLATE



WHEAT GERM



LICORICE



OAT RING  
CEREAL



PEANUT  
BUTTER



SOY



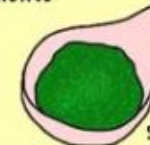
CANNED PORK  
& BEANS



GRANOLA WITH  
RAISINS



PINTO  
BEANS



SPIRULINA



CANNED REFRIED  
BEANS



SUNFLOWER  
SEEDS

# Allergic contact dermatitis- hand dermatitis

Chromium (potassium dichromate)

- Can be irritant / allergen
- Dyes:
  - green felt fabric (pool table)
  - yellow-green pigment (tattoos / cosmetics)
- **Leather (strengthens it)**
- Cement
- Matches
- Chromic gut suture

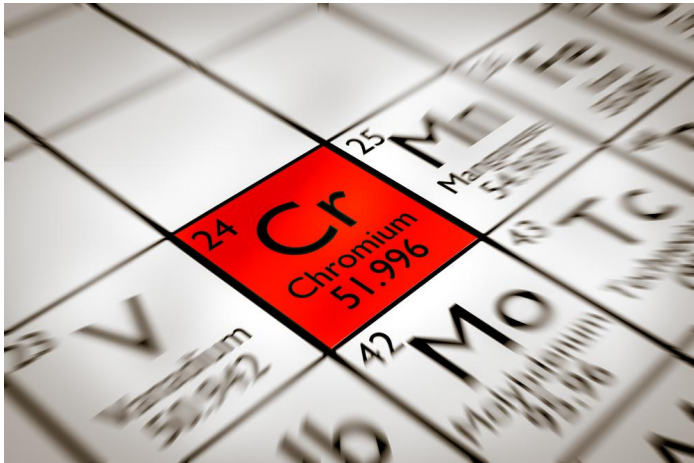




### WHERE IS POTASSIUM DICHROMATE (OR CHROMIUM) FOUND?

*At work, you may find chromates or chromium in:*

- Construction materials such as cement, mortar, concrete, bricks, plaster, drywall
- Leather tanning and product manufacturing
- Primers and chromate-based pigments in paints
- Cutting oils, corrosion inhibitors, oils, fuels and drilling muds
- Liners in high temperature industrial furnaces
- Pyrotechnics
- Printing inks
- Manufacturing, plating and metal working with chrome alloys and stainless steel
- Orthopedic and dental implants, dental prostheses
- Wood preservative manufacturing
- Green dyes used in felt and textiles
- Chrome alloy welding fumes
- Chromic surgical gut sutures



# Allergic contact dermatitis- hand dermatitis

**T.R.U.E. TEST<sup>®</sup>**  
THIN-LAYER RAPID USE  
EPICUTANEOUS PATCH TEST

**EPOXY RESIN**

- Adhesives
- Paints
- May be added to other plastics

## WHERE IS EPOXY RESIN FOUND?

*At work, you may find epoxy resin in and around:*

- Production of molds, dies and models
- Two-component paints and adhesives
- Electron microscopy embedding media
- Art and sculpture materials
- Manufacture of epoxy composite products such as tennis racquets, skis and circuit boards
- Lightweight equipment and rotor production
- Flooring, floor sealers and coatings
- Protective finishes, coverings and coatings
- Dental restoratives and epoxies



Bolognia, Jean, L. et al. Dermatology. Available from: Elsevier eBooks+, (4th Edition). Elsevier - OHCE, 2017.

# Allergic contact dermatitis- RUBBER

Chemicals added in the rubber process are sensitizers:

- Rubber Accelerants: help make liquid rubber solid
  - **Thiuram mix** (tetramethylthiuram disulfide + others)
  - **Carba mix** (carbamates + Diphenylguanidine)
  - **Mercapto mix** and **mercaptobenzothiazole**
- Rubber antioxidants
  - Phenyl-a-naphthylamine
  - Hydroquinone (also causes depigmentation)
  - Propyl p-phenylenediamine (tires, heavy duty / **black rubber mix**)
- Additives
  - Dialkyl thioureas
- NOT Latex!



Bolognia, Jean, L. et al. Dermatology. Available from: Elsevier eBooks+, (4th Edition). Elsevier - OHCE, 2017.

# Allergic contact dermatitis- hand dermatitis

Methylisothiazolinone (MI)/

Methychloroisothiazolinone (MCI)

- important allergens that have increased in prevalence over recent years
- extremely common in hand soaps, detergents, wipes, cleaning products
- relative benzisothiazolinone (BI) was allergen #5 on recent NACDG list



Bolognia, Jean, L. et al. Dermatology. Available from: Elsevier eBooks+, (4th Edition). Elsevier - OHCE, 2017.



# Allergic contact dermatitis- hand dermatitis

**T.R.U.E. TEST<sup>®</sup>**  
**THIN-LAYER RAPID USE**  
**EPICUTANEOUS PATCH TEST**

**COLOPHONY**

## WHERE IS COLOPHONY FOUND?

*At work, you may find colophony in:*

- Wood and sawdust
- Coated papers
- Cutting fluids
- Paints and stains
- Asphalt products
- Greases and oils
- Polyethylene
- Waterproofings
- Linoleum
- Wood fillers
- Printing inks
- Lacquers and varnishes
- Polishes and waxes
- Corrosion inhibitors
- Solvents
- Neoprene rubber
- Soldering materials
- Drive belts



Bolognia, Jean, L. et al. Dermatology. Available from: Elsevier eBooks+, (4th Edition). Elsevier - OHCE, 2017.



# Allergic contact dermatitis- hand dermatitis

- Glutaraldehyde
  - Important allergen for health care workers
  - Used to disinfect and sterilize equipment, surfaces, laundry; embalming fluid; x-ray film development
  - Not on T.R.U.E. test but is on NACDG standard series

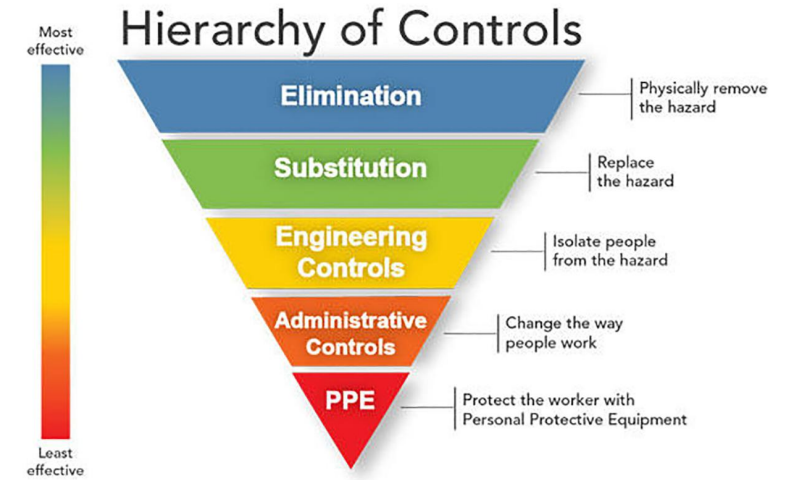


Bolognia, Jean, L. et al. Dermatology. Available from: Elsevier eBooks+, (4th Edition). Elsevier - OHCE, 2017.

# Management

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- Gloves
- Speak to glove specialist
  - Ansell Occupational health care: Barrier glove  
[www.ansellpro.com](http://www.ansellpro.com)
  - Northern Safety and Industrial: Silver Shield glove  
[www.northernsafety.com](http://www.northernsafety.com)
- Time off from work: 2-3 weeks



# Management

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Topical steroids, biologics such as dupilumab.  
Immunosuppression with systemic steroids, cyclosporine, methotrexate. Antihistamines as needed.

Refer for patch testing □

Computerized databases for suitable personal care products

- CAMP (Contact Allergen Management Program)

[www.contactderm.org](http://www.contactderm.org)

- SkinSafeProducts

[www.skinsafeproducts.com](http://www.skinsafeproducts.com)

# Putting it all together: occupational dermat consult- full body rash

## A Mini-epidemic of Suspected Contact Dermatitis to Delta Airlines Uniforms

### *To the Editor:*

In mid-2018, Delta Airlines launched a new uniform line. Soon after rollout, hundreds of Delta flight attendants reported rashes and other symptoms<sup>1</sup>; allergic contact dermatitis to the new uniforms was suspected.

A total of 18 Delta patients were referred between January and October 2019 to 4 patch testing centers and included in the analysis. Table 1 highlights the demographics of these patients. Sixteen patients (88.9%) were female and had an average age of 40 years. The most common morphology was scattered erythematous papules ( $n = 8$ , 44.4%). The predominant location of rash was on the torso ( $n = 16$ , 88.9%) and face/neck ( $n = 9$ , 50.0%). Eight patients (44.4%) also reported nondermatologic complaints associated with the uniform.





# Putting it all together: occupational derm consult: facial rash related to face mask

## Do not lose sleep over mask allergic contact dermatitis

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*Chestnut Hill and Wellesley, Massachusetts and New York, New York*

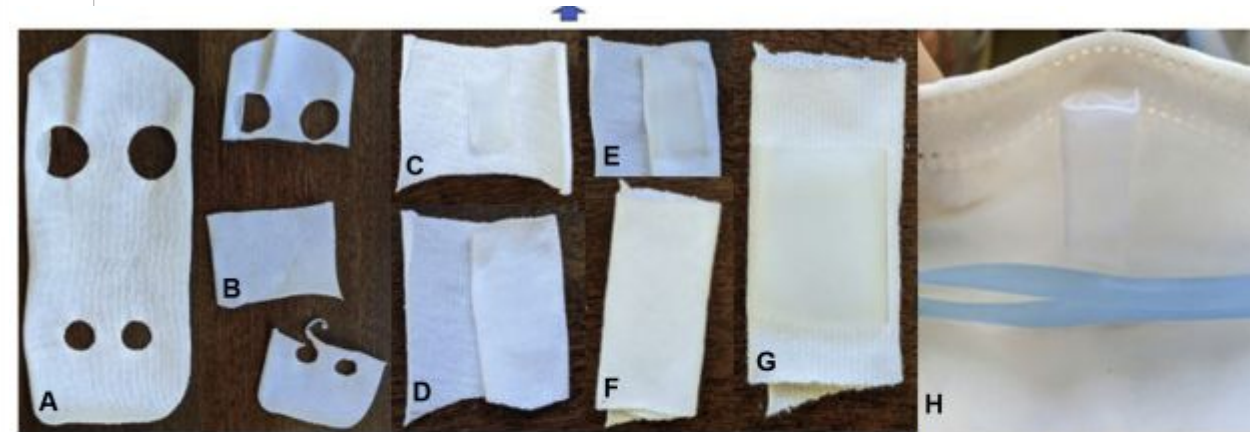
**Key words:** allergic contact dermatitis; face mask; N95 respirator; occupational.



**Fig 1.** Allergic contact dermatitis. Facial erythema and irritation of the nasal bridge after wearing N95 mask.



**Fig 2.** Self-patch test. Cluster of pruritic papules developed on day 3 after removal of self-patch-tested material.



**Fig 3.** Steps to create the barrier strip. **A**, Intact barrier strip. The solid middle piece of the cloth should be cut out (**B**), and tape is used to fold it like a burrito with the ends untucked (**C** to **F**). Tape is placed in the center (**G**). The barrier is taped into place inside the mask overlying the area of skin inflammation (**H**).

# Putting it all together: pandemic related occupational skin disease patterns

TABLE 1 The main materials, potential allergens, sites of skin lesions and symptoms caused by PPE.

PPE	Material	Allergen	Body regions	ASR
Masks	Surgical mask	Soft absorbent sheets, Polypropylene barriers, Melt-blown non-woven fabric	Nasal, Bridge, Ears, Cheeks, Perioral, Chin	Redness, Itching, Dryness
	N95/KN95 respirator	Skin-friendly layer, Structural support filter layer, Hydrophobic coating layer		Redness, Itching
	Cloth mask	Cotton, Polyester		Erythema, Scaling
Gloves	Latex, Nitrile rubber, Plastic	Latex, Carba mix, Mercaptobenzothiazole (MBT), Thiuram mix	Hands	Dryness, Rash, Itching
Protective clothing	Polypropylene melt-blown cloth, Polyester fiber	Vinyl, Rubber materials	Limbs, Trunk	Dryness, Pruritus
Protective goggles	Polycarbonate, Optical resin, Polymethyl methacrylate	Not available at present	Nasal bridge	Pressure, Sores, Rash
Face shields	Elastic, Headband, Polycarbonate	Not available at present	Forehead	Abrasions, Itching

Table 1 Reported cases of allergic contact dermatitis due to personal protective equipment and hand hygiene during COVID-19					
Authors (Alphabetical), Year Published	Country of Origin	HCWs or Non-HCWs	Number of Patients	Location of Dermatitis	Causative Agent
Aerts et al, <sup>14</sup> 2020	Belgium	HCWs	1	Nose Cheeks	Formaldehyde and 2-bromo-2-nitropropane-1,3-diol (bronopol)
Bothra et al, <sup>15</sup> 2020	India	Both	4	Periauricular	No patch testing—suspected thermoplastic elastomer, rubber, latex
Ferguson et al, <sup>16</sup> 2020	United Kingdom	HCWs	13	Face	Unknown
			30	Hands	Limited patch testing—“rubber accelerators”
Singh et al, <sup>17</sup> 2020	India	HCWs	3	Face	Unknown
Xie et al, <sup>18</sup> 2020	China	Non-HCWs	1	Nasal Bridge Cheeks	Toluene-2,4-diisocyanate, diaminodiphenylmethane, and hexamethylene diisocyanate

Tang H, Wang H, Hamblin MR, Jiang L, Zhou Y, Xu Y, Wen X. Contact dermatitis caused by prevention measures during the COVID-19 pandemic: a narrative review. *Front Public Health*. 2023 Jul 20;11:1189190. doi: 10.3389/fpubh.2023.1189190. PMID: 37546301; PMCID: PMC10400336.

Abdali S, Yu J. Occupational Dermatoses Related to Personal Protective Equipment Used During the COVID-19 Pandemic. *Dermatol Clin*. 2021 Oct;39(4):555-568. doi: 10.1016/j.det.2021.05.009. Epub 2021 May 31. PMID: 34556245; PMCID: PMC8165076.