



CONTACT DERMATITIS AND OCCUPATIONAL DERMATOSES

TWO CASES OF ALLERGIC CONTACT DERMATITIS FROM TOPICAL CORTICOSTEROIDS

Joo Yeon Ko⁽¹⁾ - Dong Seok Shin⁽¹⁾ - Young Wook Ko⁽¹⁾ - Dong Uk Cheon⁽¹⁾ - Won Seon Koh⁽¹⁾ - Jeong Eun Kim⁽¹⁾ - Young Suck Ro⁽¹⁾

Department Of Dermatology, Hanyang University College Of Medicine, Seoul, Republic Of Korea⁽¹⁾

Background: Topical corticosteroids are frequently used for the treatment of various inflammatory skin diseases including allergic contact dermatitis (ACD). However, paradoxical allergic skin reactions to topical corticosteroids have not uncommonly been reported.

Observation: Patient 1, a 52-year old man, presented with facial eczema resulting from the use of sunscreen product. He was treated with 0.1% prednicarbate ointment but his facial lesions were getting aggravated with serous discharge. A definite allergic reaction to the ointment and mild irritant reaction to the sunblock were proven by patch test. Patient 2, a 18-year old woman, presented with itchy erythematous papulopatches on both malar areas. She was treated with a 1% hydrocortisone lotion under the impression of irritant dermatitis and the cutaneous lesions showed clinical improvement after the first month of the therapy. However, three months later, the patient re-visited our clinic due to facial acneiform eruption. We decided to perform patch test, which revealed delayed reaction to tixocortol on day 7. As hydrocortisone has allergenic cross-reactivity with tixocortol, we thought that this case was caused by hydrocortisone lotion. The skin lesions improved after stopping the use of hydrocortisone lotion.

Key message: Herein, we reported two cases of ACD from topical corticosteroids (prednicarbate and hydrocortisone) to remind clinicians that there is a possibility of ACD from topical corticosteroids, if previous eczematous lesions were paradoxically aggravated despite applying topical corticosteroids.

