



CONTACT DERMATITIS AND OCCUPATIONAL DERMATOSES

UNILATERAL AQUAGENIC KERATODERMA MIMICKING CONTACT DERMATITIS

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Background: Transient aquagenic keratoderma(TAK) is an acquired thickening of palm triggered or aggravated by water mostly in women aged 6–45 years. There is keratoderma appearing after minutes of immersion of hands(less likely feet) in water or after sweating. Lesions subside shortly after drying the hands, leaving minimal hyperkeratosis. One characteristic sign might be that patients bring with them a vessel to immerse their hands in water ('hands in the bucket' sign).

Associations: Aquagenic wrinkling of the palms is associated with cystic fibrosis (in about 50% of affected patients) and can be observed in up to 10% of heterozygous CFTR gene mutation carriers. Related drugs: COX-2 inhibitors, Gabapentin.

Observation: A 31 year old lady presented with a 6 year history of a unilateral rash affecting the right palm. She works in the kitchen which necessitates wearing gloves and is right handed. The lesions started initially as a coin sized lesion which gradually enlarged to involve the whole palm. It is completely asymptomatic but finds the skin on the palmar surface of the hand a little rough and dry and these changes become more marked on exposure to water.

On examination there was a slightly rough thickened skin along with mild scaling of right palm. On initial suspicion it appeared to be contact dermatitis, given the unilateral dominant hand involvement and occupational history. But, the patient brought a video showing her hand after 30-45 minutes of exposure to water depicting marked thickened hyperkeratotic skin affecting the right palm with sharp demarcation around the edge corroborating with the diagnosis of TAK.

Key message:

1. Demonstrating an uncommon type of Keratoderma
2. Unilateral type is rare.
3. New version of hands in the bucket sign where the patient might bring a video instead of a bucket.

