

of occupational allergic contact dermatitis (3-6). To our knowledge, DIC has yet to be reported as an allergen.

Because of its highly toxic nature, routine patch testing with DCC should be avoided. But, if it is considered necessary, 0.1% acet. has been recommended, though further testing in 1 of our patients indicated positive reactions down to a 10× lower concentration. Therefore, it might be advisable to test with lower concentrations.

Workers handling carbodiimides must be very careful to wear protective gloves and to use a hood. The best advice on treatment is to avoid exposure in the first place, because once sensitized "you've had it" (7).

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Allergic contact dermatitis from naftifine

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Case Report

A 49-year-old housewife was admitted as an emergency with severe, acute, superinfected eczema of the hands and feet 1 week into self-treatment first with Mycolog[®] cream, containing nystatin, triamcinolone and neomycin, and then with Exoderil[®] cream, containing naftifine, because of suspected foot mycosis. Her past medical history included psoriasis for many years.

Patch tests with Hermal (Trolab[®]) allergens were performed to standard series, antimicrobials and preservatives, vehicles and emulsifiers, corticosteroids, medicaments, perfumes and her own topical medicaments. Positive results are shown in Table 1. Further patch tests were performed with the isolated components of Exoderil[®] cream (Table 2). The positive reaction to Mycolog[®] was explained by its containing ethylenediamine, to which the patient reacted in the standard series.

Table 1. Patch test results of screening series

	D2	D3
p-phenylenediamine 1% pet.	-	++
perfume mix 8% pet.	++	++
ethylenediamine dihydrochloride 1% pet.	++	++
oak moss absolute 1% pet.	+	++
Exoderil [®] cream as is	++	++
Mycolog [®] cream as is	-	++

All other substances were negative.

Comment

Naftifine is a topical antifungal belonging to the allylamine group, introduced in the early 80s. As well as its efficacy against fungi, it is characterized by strong anti-inflammatory effect (1) and potency of penetration. Compared to the imidazole clotrimazole, its efficacy seems to be equal or better (2-6).

In the last few years, several cases of contact allergy to naftifine have been reported (7-11). These are to be distinguished from the well-known irritancy of naftifine (2, 8, 12), which has the same frequency as with imidazole derivatives and is probably due to its galenic form (13).

In preclinical studies, there was no evidence of sensitization after local application of various formulations of naftifine (14, 15). The risk of sensitization was estimated as less than 1 : 100,000 (15). This assessment has since been questioned (8, 13) and naftifine shown to be a moderate sensitizer (13). Compared to 14 of the most fre-

Table 2. Patch test results with the components of Exoderil[®] cream

	D2	D3
naftifine hydrochloride 5% alc.	+	++
cetyl palmitate 10% pet.	IR	-
sorbitan monostearate 10% pet.	IR	-

quently used imidazoles, its sensitizing capacity seems to be greater (16).

In comparison with the large number of naftifine preparations sold, the few cases reported of sensitization do not seem to be of epidemiological importance. However, in view of the increasing sale of the product on the OTC market, we should be aware that the frequency of allergy may increase.

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Allergic contact dermatitis from sertaconazole with cross-sensitivity to miconazole and econazole

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Contact dermatitis from topical imidazoles is seldom reported (1-3). In most cases, allergy is to the imidazole itself, but in some cases to the vehicle.

Case Report

A 26-year-old man, with a history of acne, presented with a 1-month history of impetiginized eczema on the dorsum of the right hand, following the prescription of Zalain® (sertaconazole) cream for a previous injury. Discontinuation of Zalain® cream and treatment with topical and oral antibiotics and a topical corticosteroid led to resolution in 10 days. He denied previous use of antifungals.

He was patch tested with the GEIDC standard series, Zalain® cream and its individual constituents (sertaconazole,

nipagin, Labrafil M2130, Peceol, Tefose 63 and sorbic acid), with the results shown in Table 1. Later, we patch tested the patient with an imidazole series, with the results shown in Table 2. 20 healthy controls were negative to Zalain® cream, as is, and sertaconazole 1% and 5% pet.

Table 1. Initial patch test results

Allergen	D2	D4
GEIDC standard series	-	-
Zalain cream as is	++	++
sertaconazole 5% pet.	+++	+++
sertaconazole 1% pet.	++	++
other constituents of the cream	-	-

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