

Our patient had severe atopic dermatitis and had used a large number of topical treatments for a long time. This in turn may explain the sensitization to Amerchol L 101, which is not a component of Fucidin\*.

#### Acknowledgement

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### Nifuratel contact dermatitis

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**Key words:** allergic contact dermatitis; nifuratel; N-(5-nitro-2-furfurilidene)-3-amino-5-methyl-mercaptomethyl-oxazolidone; medicaments.

Nifuratel, N-(5-nitro-2-furfurilidene)-3-amino-5-methyl-mercaptomethyl-2-oxazolidone, is marketed in Italy as an antimycotic and antitrichomonas agent, and named Macmiror when alone and Macmiror Complex when mixed with nystatin. The first case of allergic contact dermatitis from nifuratel was reported by Bedello (1). Subsequently, there were 2 other reports (2, 3).

#### Case Reports

##### Case no. 1

A 37-year-old man presented with severe edema and erythema of the penis and genital region, with spread to the buttocks, upper thighs and abdomen. Pruritus was prominent.

The history revealed that he had applied an ointment containing nifuratel and nystatin, on the advice of his general practitioner, to relieve itching of the genital area. The symptoms first appeared after 10 days of treatment.

His personal atopic history was negative, and there was no history of previous contact dermatitis. His brother had grass-pollen asthma.

Patch tests with the GIRDCA standard series, Macmiror Complex ointment, and its active components at 1% in acetone gave positive reactions only to the ointment (+++) and nifuratel (+++) at D2 and D3.

##### Case no. 2

In the summer of 1988, a 32-year-old man suffering from haemorrhoids used some suppositories and an

ointment containing nifuratel (Emorril) to relieve the burning sensation and pain. After 2 weeks, he developed a severe contact dermatitis of the perianal region. His general practitioner treated the lesions with topical steroid and with boric acid dressings.

In December 1989, the patient presented with an acute contact dermatitis of the perianal region. His general practitioner had treated the lesions with topical steroid. The history revealed that he had again applied Emorril ointment to treat a new attack of haemorrhoids. His family and personal history of atopy was negative.

After resolution of the lesions, we patch tested him with the GIRDCA standard series, Emorril ointment, and its active ingredients at 1% in acetone, and obtained positive reactions to the ointment (+++) and nifuratel (+++), reading at D2 and D3.

In Italy, nifuratel is also an active component of vaginal suppositories and intercourse can be the primary route of sensitization for a man whose partner is using the compound (3).

#### References

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