



Address:

□ 109 N Eagle Road, Havertown, PA 19083

□ 1202 Foulk Road, Suite A, Wilmington, DE 19803

Phone: (610) 789-SKIN(7546)

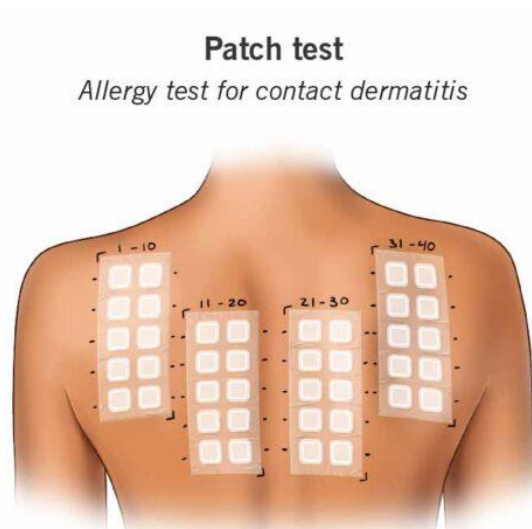
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Contact Dermatitis

What Is Contact Dermatitis?

Contact dermatitis is a skin rash caused by something that **touches your skin** and triggers irritation or an allergic reaction. It can appear suddenly or develop over time with repeated exposure.

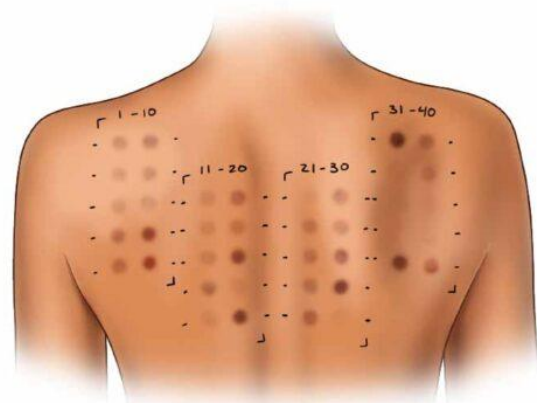
Contact dermatitis is **not contagious**—you can't spread it to others.



Patch test

Allergy test for contact dermatitis

Patches with potential allergens left on for two days.



Areas checked two days after removal.

Types of Contact Dermatitis

1) Irritant Contact Dermatitis (Most Common)

This happens when a substance **damages the skin barrier**. It's not a true allergy.

Common triggers:

- Frequent handwashing and sanitizers
- Harsh soaps, detergents, cleaning products
- Friction, sweat, wet work (hands in water often)

2) Allergic Contact Dermatitis

This is a true **immune (allergic) reaction** to a specific ingredient or material—even tiny amounts can trigger a rash.

Common allergens:

- **Fragrances**
 - **Preservatives** in skincare/cosmetics
 - **Nickel** (jewelry, watches, belt buckles)
 - **Hair dye** ingredients
 - **Rubber/latex** and certain glove chemicals
 - **Poison ivy/oak** (plant resin)
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What Does Contact Dermatitis Look and Feel Like?

Symptoms can include:

- Itching (often intense)
- Redness or discoloration (may look different across skin tones)
- Dryness, scaling, cracking
- Bumps, blisters, or weeping/oozing in acute flares
- Burning or stinging (more common with irritant reactions)

Common locations:

- Hands and fingers
 - Eyelids and face (from cosmetics or airborne exposures)
 - Neck (fragrances, hair products)
 - Wrists (watchbands), earlobes (earrings), waistline (belt buckles)
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How We Diagnose Contact Dermatitis

Diagnosis starts with:

- A detailed history (products, work exposures, hobbies, new items)
- A focused skin exam

If an allergy is suspected, we may recommend **patch testing**—a standardized way to identify which ingredient(s) your skin reacts to.

Treatment Options

Treatment depends on severity and the cause, but usually includes:

1) Identify and Avoid the Trigger

This is the most important step—especially for allergic contact dermatitis.

2) Calm Inflammation

Prescription anti-inflammatory treatments may be used during flares, especially for:

- Hands
- Face/eyelids
- Widespread rashes

3) Repair the Skin Barrier

- Gentle, fragrance-free cleanser
 - Thick moisturizers/ointments
 - Protective habits (gloves for wet work, frequent moisturizing)
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Pre-Op Instructions (Before Your Visit / Patch Testing)

(Not surgery—these are “before your appointment” tips.)

Before Your Dermatology Visit

Bring or list everything that touches the area, including:

- Soaps, shampoos, conditioners
- Moisturizers, makeup, sunscreen
- Perfumes/colognes
- Laundry detergent/fabric softener
- Work products (gloves, chemicals, tools)
- New jewelry, watchbands, clothing, topical medications

Tip: Photos of product ingredient labels are very helpful.

If Patch Testing Is Scheduled

- Avoid applying creams/ointments to the test area (usually the back) the day of placement.
 - Plan to keep patches **dry and in place** as instructed (no heavy sweating or swimming).
 - Ask us about medications that may interfere with results (we'll guide you).
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Post-Op Instructions (After Starting Treatment / After Patch Testing)

After Starting Treatment

- Use medications exactly as directed (overuse and underuse can both cause problems).
- Moisturize regularly—barrier repair speeds recovery.
- Avoid scrubbing, exfoliating, or using fragranced products on the rash.
- Use sun protection, especially if the rash is on exposed areas.

After Patch Testing

- Keep patches dry and intact until removal as instructed.
- Avoid sweating/exercise that may loosen patches.
- Expect some itchy spots where allergens were placed—this can be normal.
- Return for your scheduled readings so results can be interpreted correctly.

Call the Office Promptly If You Have

- Rapidly spreading redness, severe swelling, blistering, or significant pain
 - Signs of infection (worsening warmth, pus, fever)
 - Eyelid swelling affecting vision
 - Difficulty breathing or facial/lip swelling (seek urgent/emergency care)
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Prevention Tips

- Choose **fragrance-free** products when possible
 - Use gentle hand hygiene (lukewarm water + mild cleanser)
 - Moisturize after every handwash
 - Wear protective gloves for cleaning/wet work (with cotton liners if needed)
 - Avoid “natural” or “essential oil” products if you’re sensitive—these can be common triggers
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Contact Dermatitis – Frequently Asked Questions (FAQ)

Is contact dermatitis the same as eczema?

Contact dermatitis is a type of eczema caused by **external exposure** (irritant or allergic). Atopic dermatitis (classic eczema) is more related to **barrier and immune sensitivity** and may occur without a specific external trigger.

How do I know if it’s allergic or irritant contact dermatitis?

It can be hard to tell by appearance alone. Allergic reactions may spread beyond the contact area, while irritant dermatitis often stays where exposure happens (like hands). **Patch testing** can help confirm allergic triggers.

What is patch testing?

Patch testing is an in-office test where small amounts of common allergens are placed on your back with adhesive patches. We check your skin over several days to identify which substances trigger a reaction.

Can contact dermatitis happen right away?

Yes—but allergic contact dermatitis can also develop **after years of exposure**. You can become allergic to something you’ve used for a long time.

Why are my eyelids affected?

Eyelid skin is thin and sensitive. Reactions often come from:

- Makeup/skincare
 - Hair products that run onto the face
 - Nail products transferred by touch
 - Airborne exposures (sprays, fragrance)
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Does contact dermatitis go away permanently?

It can—if the trigger is found and avoided. However, ongoing exposure (even small amounts) can keep the rash coming back.

Do I need to throw away all my products?

Not necessarily. We often start by simplifying your routine and identifying likely triggers. If patch testing is done, we can give you a **safe product list** based on your results.

When should I see a dermatologist?

Schedule a visit if:

- The rash keeps returning
- OTC products aren't helping
- It involves the face/eyelids or hands (common and disruptive areas)
- You suspect work-related exposure
- You may need patch testing