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The mission of the ACDS is to advance the subspecialty of allergic contact dermatitis under the wider umbrella of dermatitis. Our goal is to provide a forum where a wide range of patch testers can learn from one another and move the needle forward to help our patients. Looking ahead we want to continue to inspire physicians to become excited about the field and to provide opportunities for them to learn through our mentorship programs, our journal, and provide opportunities to present at our meetings. A priority is to offer educational resources on best practices in patch testing, emerging allergens, and hot topics in our field. We also continue to support public health by measures that will mitigate the risk of sensitization to allergens in our population while educating government and industry. Our future will depend on our ability to demonstrate our value through outcomes based research and we plan to fund further studies going forward.

It is a true honor to help and lead our society into the future and to be a part of such a remarkable group of colleagues. I want to thank all of our dedicated committee and board members for all of their great ideas and volunteerism. I also want to thank all of our loyal industry sponsors. Lastly, I want to thank our
administrator, Cindy Froehlich, who has been with the ACDS since 2000.

NEW CAMP APP

This year we have some exciting news about a new App for CAMP. Once it is released, patients will have the ability to select products free of allergens based on their unique CAMP identifier directly from their smart phones. In addition they will have the ability to catalogue their favorite products on their phones for quick access.

Online Resources Additions:

ACDS is consistently expanding the online resource library. Recently a new website regarding allergies related to shoes has been established. It can be found in the ACDS resource library. If you know of a resource that would be an addition to the library, please email us and let us know.

Call for Submissions in Dermatitis

Thank you for helping make Dermatitis a wonderful journal for our society. As the society moves forward into the New Year, it is important to continue to grow the journal submissions. This cannot be achieved without member support. Please help the society keep the journal wonderful by submitting studies on contact, atopic, occupation, and drug dermatitis.

Additionally, please submit and encourage trainees to submit well-written reviews, which are often a good source of citations. For each published review, ACDS provides an honorarium of $250. Subject for review can included any of the following topics:

- Allergy to preservatives
- Allergy to textiles including dyes and hardeners
- Allergy to cosmetics
- Allergy to fragrances
- Allergy to new rubber ingredients
- Genetic basis for atopic dermatitis including analyses of published studies
- Patch testing for drug reactions.

To submit to the journal, please visit journals.lww.com/dermatitis/pages/default.aspx and use the “For Authors” tab to submit a manuscript.
Dermatitis Announces a new Pediatric Contact Dermatitis Section

*Dermatitis* is pleased to announce the creation of a new section on Pediatric Contact Dermatitis led by co-section editors Sharon Jacob and Jonathan Silverberg. The purpose of this new section is to develop and encourage critical data collection and analysis in this emerging field. Novel articles demonstrating index cases, evidence-based reviews and original studies including basic, translational and epidemiological research are encourage.

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Fisher Lecture: Anthony A. Gaspari

The Alexander Fisher Lectureship is awarded in honor of Alexander Fisher, MD honoring his contributions to the field of contact dermatitis. The lecturer is selected based on his or her contributions to contact dermatitis, reflection of the spirit of Dr. Fisher's enthusiasm for the subject of contact dermatitis, and for sharing knowledge and experience in evaluating patients.

The 2016 Fisher Lecturer is former ACDS President; Anthony A. Gaspari. Dr. Gaspari has practiced for over 35 years and is currently a Shapiro Professor of Dermatology at the University of Maryland School of Medicine and a professor of microbiology and immunology at the University of Maryland Medical Center. His special interests and expertise include immunology and skin allergies.

His Fisher Lecture is entitled, “The Immunology of Contact Dermatitis ... ‘Something to do with T-cells’”. The lecture is an overview of the immunology of contact dermatitis with an emphasis on recent advances in the field and how this relates to patients and dermatitis.

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Pearl of Dermatology

*By Erin M. Warshaw, M.D.*

**Precis:** Wood allergens may cause contact dermatitis, but patch testing with patient-provided samples often presents technical challenges in the clinical setting.

**Discussion:** Patients commonly present with various items from home or work for patch testing. While guidelines exist for industrial chemicals, other products may be challenging. The following case illustrates a common scenario and solution.

A middle-aged male was referred to our patch testing clinic with a widespread dermatitis of several months duration; the most severely affected body areas were his hands and face. The patient was a custom cabinet maker who worked daily with a variety of wood species. Allergic contact dermatitis to woods has been well described and wood allergens may cause contact dermatitis, often in an airborne pattern. Because of concern for occupational contact dermatitis, the patient was asked to provide samples of the different types of wood from his workplace.
The patient brought in over 20 small samples of different types of wood. The solid wood samples were not practical for skin application as sawdust is typically required for patch testing. Without sandpaper available in the clinic, we sought other methods to produce sawdust. Surgical blades were unwieldy. However, using disposable dermatology curettes to apply friction across the end grain of the solid wood samples, we were able to create fine sawdust suitable for dilution (Figures 1-3). Using a separate curette for each type of wood also ensured a purified sample of sawdust, reducing the risk for cross-contamination between samples.

**Pearl:** Disposable dermatology curettes are an effective, inexpensive, and readily available tool that can be used to create purified wood sawdust suitable for patch testing.

**References:**


**Call for Pearls**

If you have a practical clinical pearl with tips and tricks on patch testing or a short case report, please consider sharing it with us for submission in our future ACDS Newsletter.

To submit, please email us at: info@contactderm.org
New Blog needs Volunteers to Post

“Reactions,” the new dermatology blog linked with the ACDS journal *Dermatitis*, encourages members to post conversations related to the fields of clinical and experimental dermatitis. The blog was named to serve as a reminder that clinicians have an opportunity to weigh in on hot topics, controversial topics, and more in a less formalized discussion forum.

Join in the discussion and contribute to the blog by following the link below:
http://journals.lww.com/DERMATITIS/blog/reactions/Pages/default.aspx

Annual Meeting Committee Report

We are looking forward to the 27th Annual Meeting of the American Contact Dermatitis Society focusing on *Bridging Allergy and Therapeutics* on March 3, 2016 at the Mayflower Hotel, 1127 Connecticut Avenue NW in Washington, DC. Other meeting highlights will include the Fisher Lecture, 7th Annual Contact Allergen Bee, CAMP informational vignettes, and the announcement of the Contact Allergen of the Year.

“We are looking forward to seeing many of you in Washington, D.C. on March 3, 2016. I am delighted and honored that Anthony Gaspari, M.D. will be our Fisher lecturer. This year we will be featuring a panel discussion on Risk Reporting and Mitigation in Consumer Products for the Skin: The Role of Government and Industry featuring speakers from the FDA, industry, and advertising. There will also be an opportunity to interact with colleagues during our non-scripted interactive sessions on pediatric dermatitis, metal hypersensitivity, and atopic dermatitis.” – Dr. Bruce Brod, President of ACDS

Mentoring Award

Congratulations to Dr. Jennifer Chen and Dr. JaiDe Yu who received the ACDS Mentoring Award.

Jennifer traveled to Copenhagen, Denmark to spend time with Dr. Jacob Thyssen at the Gentofte Hospital. While there, Jennifer was introduce to a number of distinguished professionals in the field and participated in a project exploring when to patch test patients with atopic dermatitis. Additionally, she attended the COST and EADV meeting in Copenhagen and enjoyed benefiting from the great educational sessions.

“I think the greatest difference [in patch testing] was the increased number of positive controls on healthy volunteers and the capability to process samples differently such as with the ultrasonic bath.
They also had dedicated chemists assist with choosing patch allergens and contacting companies for ingredient lists.” – Dr. Jennifer Chen

JiaDe traveled to the Philadelphia, Pennsylvania to work with Dr. James Treat and Dr. Bruce Brod at the University of Pennsylvania and Children’s hospital of Philadelphia. While there, he took the opportunity to begin a multi-step project with his mentors to create a patch-test panel specific to children with potential allergic diaper dermatitis and is in the process of completing an original research manuscript for publication in Dermatitis that examines the potential allergens in the most commonly used diapering products including diaper creams, wet-wipes, and diapers.

“My mentorship gave me a glimpse into the niche field of pediatric contact dermatitis. It allowed me to begin a fruitful relationship with experts in this field and begin a meaningful research project that will benefit our littlest patients. I hope to build on my mentorship experience throughout my career and advance the field of pediatric contact dermatitis through my research and clinical efforts.” – Dr. JiaDe Yu

Nickel Update: Nickel is Costing!

For over 70 years, nickel has been recognized as a significant cause of allergy. Initiatives to direct manufacturers to use safer metals that release less nickel have been in effect in Europe for over a decade. Adoption of similar initiatives in the US could lead to a projected savings of $5.7 billion per year, or more than $113 billion over a 20-year period!

The LLU-Provider registry study completed its first year of data collection on Dec 31, 2015. Notably, providers reported over 1000 pediatric cases into the database. Notably nickel, as anticipated, was the highest confirmed prevalent allergen in children nationally. In August 2015, the American Academy of Dermatology responded to these high prevalence rates in children and issued a Position Statement on Nickel Sensitivity.

(Approval by the Board of Directors: August 22, 2015)

To further investigate the vast prevalence and significant underreporting of nickel contact dermatitis, the LLU research group has constructed a Patient self-reporting Registry of Nickel Allergic Contact Dermatitis.

The goal of the Patient Registry is to assess the number of adults and children in the United States living with nickel sensitivity. Data gathered within the registry may be utilized to encourage policy makers in establishing a US Nickel Directive-- similar to the successful European legislation in place for over a decade.
The LLU research team hopes and encourages you to provide your patients with the link to the brief self-reporting form.  https://emg.wufoo.com/forms/nickel-allergic-contact-dermatitis-survey/

Coding for the new ICD-10

October 1, 2015 marked the transition to the new ICD-10 (International Classification of Diseases, Tenth Revision) code sets.

Some of the changes seen with this transition include: the addition of information relevant to ambulatory and managed care encounters; expanded injury codes; the creation of combination diagnosis/symptom codes; laterality; and greater specificity in code assignment.

For Contact Dermatitis, this meant a transition from the ICD-9-CM code 692.X—which used to cover multiple different conditions including various forms of dermatitis—to more specific coding options with ICD-10-CM. In ICD10, coding starts with a primary category, which then branches out into a number of specific coding options:

- **Primary category:** L (0-99, disease of the skin and subcutaneous tissue)
- Then, **2-digit category:** 23 (allergic contact dermatitis); 24 (irritant contact dermatitis); 25 (unspecified contact dermatitis); or 30 (other and unspecified dermatitis)
- Then, the specific, final diagnosis code could be any of the following possibilities based on the clinical scenario and making emphasis in the cause. Some examples include:

![Contact Dermatitis Codes](image)

Congratulations to 2015 Annual Meeting Award Winners

**2015 Fisher Lectureship Award** Andrew Scheman, MD  “Contact allergy Cross-Reactors”

**2015 Fisher Resident Award** Jamie Hanson “Contact Allergy to Surfactants in a Liquid Cleaner”

**2015 Maibach Travel Award** Kristian F. Mose, MD from Denmark

**Contact Allergy Bee Winner** Emily Newsom, MD
Memoriam - Troy Rustad

Troy Rustad, who has been a member of the ACDS since 2004 passed away last year in Lincoln, Nebraska. Rustad was active in the community and volunteered at local clinics while also maintaining a practice with his father. He completed residencies in internal medicine and dermatology at the University of Minnesota and the Mayo Clinic. He was known to the community for being a wonderful and caring dermatologist.

New Members – The ACDS would like to welcome the newest members (117 total)

Adjunct Members
Gayle Boghosian, Forest Falls CA
Geri Gannaway, Chattanooga TN
Honor Hightshue, Chattanooga TN
Kelly Anne Swanson, Clarkston MI

Affiliate Members
Heather Cassell, Tuscon AZ
Helena Friman, Toronto-Ontario
Leslie Heller, Knoxville TN
Beth Lange, Washington DC
Monica Ponce, Miami FL
Pushpa Roa, White Plains NY
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Sharizan Abdul Ghaffar, Dundee GB
Marius Botha, Eimeo-Australia

Fellow Members
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Tahira Batool, Ajax-Ontario
Fernanda Bellodi Schmidt, Cincinnati OH
Emily Berger, Haskensack NJ
Joseph Bikowski, Swickley PA
Yasmeen Bilimoria, Glenview IL
Carey Bligard, Fort Dodge IA
Naana Boakye, Englewood Cliffs NJ
Corinna Bowser, Narberth PA
Varaz Bozoghlanian, Los Angeles CA
Alicia Cannavo, Vicente Lopez-Argentina
Tamella Cassis, Prospect KY
Stephanie Chan, Torrance CA
Dean Chiang, Torrance CA
Sarah Chisolm, Atlanta GA
Diane Chiu, Bellevue WA
Lawrence Ciesmier, Kirkville MO
Marc Cromie, Chattanooga TN
Adebola Dele-Michael, New York NY
Haiyan Deng, Palo Alto CA
Nicole Donester, Great Falls MT
Robert Ecker, Groton CT
Dirk Elston, Charleston SC
Layne Fielder, Destin FL
Jacqueline Flandry Fuscell, Columbus GA
Jill Fruge, Baton Rouge LA
Kathleen Garvey, Manitowoe WI
Sarah Gee, Santa Monica CA
Robert Glinert, Middleton WI
Carolyn Goh, Los Angeles CA
Mercedes Gonzalez, Miami FL
Samual Goos, Acton MA
Clayton Green, Marshfield WI
John Griffin, Dallas TX
Julie Harper, Birmingham AL
Holly Hazlett, The Woodlands TX
Natalia Hernandez, Bogata-Columbia
Jennifer Holman, Tyler TX
Brett Hronek, Springfield MO
Lauren Hugay, Birmingham, AL
Sara Hylwa, Minneapolis MN
Erum Ilyas, King of Prussia PA
Benjamin Kaffenger, Columbus OH
Qurat Kamili, Dallas TX
Elizabeth Kelly, Holladay UT
Mark King, Mountain Home AR
Anastasiya Kleva, Bronx NY
Charles Knapp, Tampa FL
Sandra Kopp, New York NY
Susan Laman, Phoenix AZ
Larissa Larsen, Sacramento CA
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Special thanks to the contributors of this edition of the ACDS newsletter: Dr. Bruce Brod, Dr. MariPaz Castanedo, Dr. Sharon Jacob, Dr. Erin Warshaw, Dr. Jennifer Chen and Dr. Jacob Thyssen, Dr. Andrew Scheman and Cindy Froehlich

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