INTRODUCTION

Hand Eczema implies that the dermatitis is largely confined to hands only with minor involvement of other areas. Hand eczema is the most common form of Occupational skin disease (OSD). HE is localized to the hands, which are important organs of expression, communication, and are necessary for carrying out daily household and work-related activity. Impairment in form or function can result in severe emotional and psychological distress associated with a poor quality of life comparable to diseases with extensive skin involvement. Skin protection measures and topical treatment are effective in the majority and form the mainstay of treatment regardless of any other additional treatment. Systemic therapy results in remission but cannot be continued indefinitely.

AIM

To determine the following in the cases of hand eczema

1. To study the epidemiology and clinical pattern of the disease
2. To study the etiological factors of the disease.

METHODOLOGY

STUDY DESIGN

Descriptive study

SAMPLE

During the study period a total of 50 patients with hand eczema were registered and observed.
**INCLUSION CRITERIA:**

All patients presenting with symptoms and signs of hand eczema to dermatology OP (other than those in exclusion criteria)

**EXCLUSION CRITERIA:**

1. Patients less than 18 years old and pregnant patients
2. Patients with acute eczema
3. Patients on systemic steroids

Detailed case history of each patient and clinical features like morphology of the lesions were noted. Patch test done with kit containing Indian standard series. Etiology for hand eczema is found out. Patients are advised regarding avoidance of prolonged contact with water, avoidance of sensitizers and are treated with topical and systemic therapy according to needs.

**RESULTS**

A total of 50 patients were included in the study of which 29 were female (58%) and 21 were male (42%). About 38% of the affected patients were in the age group 40-49 years and 26% in the age group 30-39 years. The duration of the disease was from 6 months to more than 5 years. Most of the patients had the disease (18%) for around 2 to 5 years. In our study 28% of the patients were housewives followed by 8% mason and 8% mechanic. Most common type of hand eczema in our study was unspecified (34%) followed by housewives/dry palmar eczema (26%). The most common allergen which were positive in our study were nickel sulphate (43.8%), PPD (32.7%) followed by Potassium dichromate (23.2%), Colophony, Fragrance mix and parthenium. Among these female patients had a high sensitivity to nickel sulphate and Fragrance mix. In male patients, the commonest sensitizers were Potassium dichromate and Colophony.
CONCLUSION

This descriptive study conducted in the Indian population in our hospital which is a tertiary care Centre has shown the importance of age, occupation, atopy, environmental factors and allergic sensitization in the development and recurrence of hand eczema. In our study women, most commonly housewives were affected more than men. This shows the requirement of awareness of protective measures/education among housewives. Also, the importance of patch test in identifying the allergen responsible for the disease causation/exacerbation.