What is contact dermatitis?
Contact dermatitis is an inflammation of the surface of the skin caused by exposure either to an irritant or an allergen - something your skin is allergic to - like poison ivy. It is not contagious, so you cannot spread it to another person.

What causes it?
Factors that contribute to the development of contact dermatitis include genetic predisposition, duration of exposure, friction, pressure, heat, cold or the presence of other skin diseases, especially eczema, which is often exacerbated by allergies. Pinpointing the causative agent can be difficult. It is important to consider the total environment: home, work, hobbies, medications, clothing, cosmetics, etc. If the dermatitis is caused by an allergen, skin patch testing for specific identification of causative allergens may be helpful and can be performed by an allergist or dermatologist. A referral can be made through Health Services if necessary.

Are there different types?
- Irritant contact dermatitis: Any substance can be an irritant to the skin, especially if the concentration and duration of contact are sufficient. Most irritants are chemical in nature. Irritants such as soaps, detergents, deodorants, lotions, and perfumes often require repeated or prolonged contact to produce inflammation. Stronger irritants such as acids or alkalis are so damaging that they will injure the skin immediately on contact. If daily exposure to mild irritants is continued, normal skin may become hardened or tolerant to this trauma and contact may be continued without further evidence of irritation.
- Allergic contact dermatitis: Allergic contact dermatitis, on the other hand, requires skin contact with an allergen (i.e. any product, plant or chemical to which you are allergic. The oils of plants like poison ivy or sumac, and metals like gold and nickel are very common allergens. The reaction is typically delayed. A period as long as 5 to 21 days may elapse after your first exposure to the allergen before you see a reaction. However, the reaction time after re-exposure typically occurs within 12 to 48 hours.

What are the symptoms?
The primary symptom of contact dermatitis is itching. Other signs and symptoms can include some combination of cracking and dryness of the skin, redness, inflammation, swelling, and blister formation with weeping.

How is it treated?
Treatment of contact dermatitis should begin as soon as eruption is identified. The first priority should be to avoid the offending agent if it is known. “Burrows Cool Soaks” (a drying, soothing solution) may relieve itching and is especially good if there are weeping blisters. Over-the-counter products such as calamine lotion, hydro-cortisone 1% cream, or oral Benadryl may be tried first for mild conditions.
Caladryl lotion should not be used as it may cause later sensitivity to oral Benadryl. If persistent, worsening or severe, prescription treatments are available after evaluation by a medical provider. If contact dermatitis has occurred from exposure to strong irritants, forceful and prolonged flushing with water should be used immediately, followed by a visit to Health Services.

Can I prevent it?
To prevent reactions to allergens, such as poison ivy, wash skin thoroughly as soon as possible after exposure, and attempt to identify allergic agents so that future exposure can be avoided.