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**IS HAIRSPRAY DANGEROUS? A CASE REPORT**

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Erythema multiforme (EM) is the most common clinical manifestation of allergic contact dermatitis (ACD) with noneczematous morphology. It can be caused by such factors as plant substances, topical medications, metals or various chemical compounds. Skin lesions may be limited to the site of contact with the allergen or generalized. Originally, they frequently present eczematous morphology, which after a few days changes into EM. Usually, in the first days after the contact, eruptions occur only in the area directly exposed to a substance and then become more scattered. Typically, features of EM are not verified in the histopathological picture.

A 70-year-old female patient was admitted to the Department of Dermatology for EM-like skin lesions 24 hours after the application of a new hairspray. On physical examination, erythematous edematous lesions were visible, mostly on the entire scalp and facial skin. They were accompanied by itching and burning sensations. On the skin of the neck, upper limbs, subpectoral and inguinal folds, locally confluent foci of "target-like" morphology were observed. The patient was weakened and had dyspnoea. The treatment with topical and intravenous corticosteroids, and oral antihistamines resulted in significant clinical improvement.

EM-like ACD is rare, but it ought to be emphasized that it may occur instead of typical eczema. In the case described, it was most probably caused by locust bean gum (LBG) contained in the hairspray. While the allergenic potential of LBG is known, no case of EM-like ACD induced by this substance has been reported so far. However, other ingredients of the cosmetic cannot be excluded from participating in the observed reaction. Furthermore, it is rare for an allergen causing EM-like lesions to induce general symptoms as well.