Highlights of the issue

- Update on cutaneous calciphylaxis
- Macrophage migration inhibitory factor in Dermatology
- Fixed duration therapy in leprosy
- Environmental dermatoses in Ladakh
- Demodex folliculorum as a risk factor in Diagnosing rosacea
- Annular lesions in Dermatology

Clinical and photomicrograph of Mycosis fungoides, PET-CT for staging and response assessment

**IJD® Symposium: Integrative Dermatology**

**Guest Editor: S R Narahari**
Correspondence

Authors' Reply

Reena Rai, Shanmuga Sekar C, Srinivas CR
From the Department of Dermatology, PSG Hospitals, Coimbatore, India.
E-mail: drreena_rai@yahoo.co.in

Sir,

We thank you for the valuable additional information [1] provided regarding the photo protective value of dietary botanicals. [2] As you have mentioned clinical trials are needed to validate the effects of these dietary supplements in photoprotection. A recent trial conducted in our center regarding the effect of oral and topical turmeric in photoprotection concluded that this agent raised the minimal erythema dose in most of the patients but did not offer significant photoprotection. [3] We believe further such trials with other dietary botanicals could bring in more light to this interesting and yet unexplored field of photoprotection.

References


Quick Response Code: Website: www.e-ijd.org

Author's Reply

Kiran V. Godse
Shree Skin Centre and Laboratory, Nerul, Navi Mumbai, India.
E-mail: drgodse@gmail.com

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Sir,

We thank the authors for their interest shown in the article “Use of ball point pen in the diagnosis of physical urticarial”. [1] We agree with the authors that the pressure of the hand varies from person to person. [2] This is a simple test to detect mild, moderate, and severe dermographism in office practice of a busy dermatologist.

A new instrument named Fric test has been devised by the Department of Dermatology of the Charite Hospital, Berlin, Germany. The purpose of this Fric test is the qualitative and semiquantitative diagnosis of symptomatic dermographism.

For the diagnosis of symptomatic dermographism, Fric test should be held perpendicular to the skin of the upper back or volar forearm for approximately 10
cm. Apply just enough pressure to have good contact with the skin so that all the pins are almost invisible [Figure 1]. Patients should be off antihistamines for wheal response. When all pins induce wheal response, the symptomatic dermographism can be judged as severe [Figure 2].

References