A 50-year-old Italian woman, suffering in 1979 from a non-specific pruriginous dermatitis applied with success Dermovate® cream. At the beginning of 1982, treating an irritation of the right axilla with the same topic, she developed a weeping eczema of that area. By testing her with a series of European standard patch tests, and Dermovate® cream, a positive reaction was observed. 

Dermovate® cream and unguent +++
Clobetasol-17-propionate 0.05% ++
0.5 and 1% +++
Propylene glycol 10% Chlorocresol 1% White vaseline Diprosalic unguent
(betamethasone dipropionate) Temetex, Nerisona, Travocort creams
(diflucortolone valerate) Betnovate cream
(betamethasone-17-valerate) Locacorten cream -
(fluemethasone pivalate) Vaspite unguent
(flucortin butyl ester) Topsymin unguent
(flucocinocide) Locoid cream
(HC-17-butyrate)
served only with the latter. Additional patch tests with the components of Dermovate® and with other corticosteroids (table) revealed that the reaction was due to sensitization to clobetasol-17-propionate.

Clobetasol-17-propionate is of highest clinical potency and is therefore not so extensively used as other less potent corticosteroids. In spite of its less frequent prescription, 3 other cases of contact sensitivity have already been described [1, 2]. It appears therefore that clobetasol-17-propionate may have a somewhat higher sensitizing potential than other halogenated corticosteroids.

References