

Complete Information on Dermatitis herpetiformis with Treatment and Prevention

Dermatitis herpetiformis (DH) is the skin eruption which intensely itches. The blister measles virus does not cause dermatitis herpetiformis, even if the name suggests it. The DH cause is the allergy to the gluten, the protein is discovered in the wheat and other grains. Usually allergies, like hives and hay fever, are made by the body's IgE system. Dermatitis herpetiformis is different, and is an allergy of the IgA system. IgA is an antibody produced in the lining of the intestines. The usual allergy treatments are useless. Dermatitis herpetiformis usually begins in the twenties, though children may sometimes be affected. It is seen in both men and women. People with dermatitis herpetiformis occasionally develop lymphoma in the intestines. Dermatitis herpetiformis clears completely when all gluten is eliminated from the diet, although healing usually takes several weeks to occur.

Herpetiformis of the dermatitis appear usually in young adults, and are commoner in people and people original of some areas of northern Europe. The breaking loose is caused when the gluten in the diet with IgA combines, and together they enter the blood flow and pass on. They eventually clog up the small blood vessels in the skin. This attracts white blood cells, and releases powerful chemicals called complements. Although these diseases may tend to isolate individuals with the complaint, the situation is becoming less difficult year by year. There is no known prevention of this disease. Persons with this condition may be able to prevent complications by avoiding foods that contain gluten. Several chemicals have been associated with induction of DH, including potassium iodide and cleaning solutions. Gastric manipulation (surgery) may induce Dermatitis herpetiformis.

The dermatitis herpetiformis symptom is the intense fever, stings and itches in the elbow, the knee, the scalp, the buttocks and behind neighbor. More places are possible and are is affected and is serious can change. Dermatitis herpetiformis looks like likely red, itches bump small group. There are tiny water blisters, but these are quickly scratched off. Before they form, the area usually has a burning feeling. They scab and heal over one or two weeks, but new spots continue to appear. The gut may also be affected by this allergy; this is called gluten-sensitive enteropathy or celiac disease. There are cases of gluten-sensitive enteropathy that have turned cancerous so an evaluation by a gastroenterologist is prudent. It is a systemic condition, the unpredictable skin rash may appear or be exacerbated by any irritation such as dry skin, scratching or clothing that is rough or scratchy.

The diagnosis of dermatitis herpetiformis usually at least one skin biopsy, and sometimes requires a blood research. As soon as confirmed, the treatment, although austerity life long is can put in the wax and decrease. A strict gluten-free diet will also be recommended to help control the disease. Adherence to this diet may eliminate the need for medications and prevent later complications. For patients unable to tolerate dapsone, particularly those who develop hemolysis, sulfapyridine may be substituted. Other, less effective treatments for dermatitis herpetiformis include colchicine, cyclosporine, azathioprine, and prednisone. UV light may provide some symptomatic relief. Cyclosporine should be used with caution in patients with dermatitis herpetiformis because of a potential increase in the risk of developing intestinal lymphomas. Nonsteroidal anti-inflammatory drugs may exacerbate dermatitis herpetiformis.

About the Author

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