

LETTER TO THE EDITOR

LOOK AFTER YOUR HANDS

Amid the COVID-19 pandemic much focus has been diverted towards PPE, novel disinfection procedures, ventilation and so on but potentially perilously away from a dental professional's most basic and important tools: their hands.

Contact dermatitis is an inflammatory skin condition caused by external agents which may manifest as irritation, redness, cracking and blistering. According to the Health and Safety Executive in the UK, dental nurses and dentists are more likely to develop work-related contact dermatitis compared to other occupations and annual incidence rates are nearly ten times greater than the all-professional average.¹ But why?

Dental professionals are exposed every day to potentially hazardous substances and practices including irritant ingredients in synthetic or latex gloves, soaps, hand cleansers, disinfectants and persistently wet hands from frequent hand washing followed by rushed donning of gloves.²

I wish to bring this matter to readers' attention as although good hand hygiene is already well practised by dental professionals, many find themselves hand washing more often due to more rigorous recent standard operating procedures and public health campaigns promoting frequent hand washing at home too. The heightened use of novel disinfection procedures and chemicals along with other routine occupational exposures in day to day practice may irritate and damage the skin which may ultimately impair professionals' ability to treat patients.

Many resources exist to increase the awareness, reduce the incidence and the management of contact dermatitis for healthcare professionals which will benefit readers.^{3,4,5} Their advice is condensed below:

- Reduce the risks of skin irritation by using alcohol-based hand rub instead of soap and water if appropriate (ie hands are visibly clean), ensure hands are dry and free of residual soap or hand cleanser prior to working or donning gloves and minimise contact with cleaning products or materials known to cause harmful reactions
- Apply emollient skin lotions or creams to the hands thoroughly ensuring full coverage, especially after finishing work
- Regularly check hands for early



indicators of dermatitis such as redness or dryness and identify any changes in sensation such as itching, tingling or soreness and seek appropriate treatment

- Employers play an important role and can help by considering the use of less hazardous infection control processes or products, providing hand hygiene products that are effective and minimise the risk of skin disease, training employees in the correct use of equipment and gloves, hand hygiene, skin care measures and providing emollients
- Prevention, early detection, and suitable management will quickly resolve the problem for most individuals.⁴

M. Adam, Preston, UK

References

1. Health and Safety Executive. THORS04 contact dermatitis: Numbers and rates

by occupation 2019. Available at: <https://www.hse.gov.uk/statistics/tables/index.htm#thor> (accessed October 2020)

2. Hunasehally R Y P, Hughes T M, Stone N M. Dermatitis in dental professionals. *Vital* 2012; **10**: 38-39.
3. World Health Organization. *WHO guidelines on hand hygiene in health care: First global patient safety challenge clean care is safer care*. 1st ed. Geneva: World Health Organization, 2009.
4. Janice Bianchi B P, Sheila Robertson. *Hand dermatitis a pocket guide for health care workers*. 2014. Available at: https://www.nhsggc.org.uk/media/236035/hand_dermatitis_pocket_guide.pdf (accessed October 2020).
5. Health and Safety Executive. Work-related contact dermatitis in dentistry. 2019. Available at: <https://www.hse.gov.uk/skin/employ/highrisk/dental.htm> (accessed October 2020).