

## ORIGINAL CONTRIBUTIONS

### Photochemotherapy for Psoriasis With Orally Administered Methoxsalen

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### Patch Test Reactions to Human Dander in Atopic Dermatitis

*Masami Uehara, MD, Shigeo Ofuji, MD, Kyoto, Japan* ..... 951

### Pathogenesis of Woronoff Ring in Psoriasis

*Neal S. Penneys, MD, PhD; Vincent Ziboh, PhD;  
Paul Simon, MD; Jon Lord, Miami* ..... 955

### Treatment of Kaposi Sarcoma With Vinblastine

*Stephen B. Tucker, MD, R. K. Winkelmann, MD, PhD, Rochester, Minn* ..... 958

### Pemphigus

*Frederic R. Rosenberg, MD; Saul Sanders, MD;  
Carl T. Nelson, MD, New York* ..... 962

### Topical Use of Tetracycline in the Treatment of Acne

*Donald J. Blaney, MD, PhD, Cyril H. Cook, MS, Cincinnati* ..... 971

### Acne Vulgaris

*Eugenia T. Poulos, MD, Francis J. Tedesco, MD, St Louis* ..... 974

### Systemic Chemotherapy for Psoriasis

*Paul R. Bergstresser, MD; Susan H. Schreiber;  
Gerald D. Weinstein, MD, Miami* ..... 977

## CASE REPORTS

### Multiple Halo Neurofibromas

*Maj Wayne E. Smith, MC, USAF, Lt Col John C. Moseley, MC, USAF,  
Lackland Air Force Base, Tex* ..... 987

### Maculopapular Eruption in Hypoparathyroidism

*Margaret Waisman, MD, Sean O'Regan, MB, BCh, Cleveland* ..... 991

### Subcutaneous Fat Necrosis After Paracentesis

*Norman Levine, MD, Gerald S. Lazarus, MD, Bronx, NY* ..... 993

### Physiatrics for Deforming Linear Scleroderma

*Robert I. Rudolph, MD, James J. Leyden, MD, Philadelphia* ..... 995

### Hypopigmentation With Punctate Keratosis of the Palms and Soles

*Maj Lonnie A. Cole, MC, USAF, Lackland Air Force Base, Tex* ..... 998

### Multiple Palmoplantar Histiocytomas

*Tilak R. Bedi, MD; Ravinder K. Pandhi, MD;  
Lalit K. Bhutani, MD, New Delhi, India* ..... 1001

CONTENTS—Continued

<b>Subungual Keratoacanthoma</b> <i>Warren L. Macaulay, MD, Fargo, ND</i> .....	1004
<b>Rudimentary Polydactyly Presenting as a Claw</b> <i>Howard P. Baden, MD; Joseph C. Alper, MD; Loretta D. Lee, PhD, Boston</i> .....	1006
<b>Allergic Contact Dermatitis From TEA-Coco Hydrolyzed Protein</b> <i>Edward A. Emmett, MB, BS, FRACP, Robert C. Wright, MD, Cincinnati</i> .....	1008
<b>Mucous Membrane Involvement in Generalized Pustular Psoriasis</b> <i>Gary Wagner, MD; John R. Luckasen, MD; Robert W. Goltz, MD, Minneapolis</i> .....	1010
<b>REGULAR DEPARTMENTS</b>	
<b>AAD Report</b> .....	1023
<b>Letters to the Editor</b> .....	1030
<b>Histocompatibility (HL-A) Antigens and Psoriasis</b> Residents' Journal Club, Miami; F. Carl Grumet, MD; Leopoldo Krulig, MD; Eugene M. Farber, MD; Rose O. Payne, PhD, Palo Alto, Calif. . . . <b>Neurological Symptoms in Scleroderma</b> Beth Bjerregaard, MD, Knud Højgaard, MD, Copenhagen . . . <b>In Support of Hexachlorophene</b> George Warren McCarl, MD, MPH, New York, Philip Catalano, MD, Miami, Fla. . . . <b>Treatment Schedule for Syphilis</b> Alberto Woscoff, MD, Buenos Aires . . . <b>Fluoride Toothpastes as a Cause of Acne-like Eruptions</b> Ervin Epstein, MD, Oakland, Calif, Milton A. Saunders, Jr, MD, Virginia Beach, Va. . . . <b>Juxta-clavicular Beaded Lines</b> W. David Jacoby, MD, Tucson, Ariz; Thomas Butterworth, MD; Wayne C. Johnson, MD, Philadelphia . . . <b>Aseptic Necrosis of Warts Instead of Lymphangitis</b> Harry L. Roth, MD, Daly City, Calif, Mouta Dilaimy, MD, Baltimore . . . <b>Hair Loss After Therapy With Chorionic Gonadotropin</b> Daniel J. Trozak, MD, Modesto, Calif. . . . <b>The Safety of Psoralens</b> Frank J. Jonelis, MD; John H. Epstein, MD; George Martin, MD, San Francisco . . . <b>Congenital Megalodactyly</b> Prasop Nitidandhaprabhas, MD, Donmuang, Thailand . . . <b>Treatment of Epidermolysis Bullosa Hereditaria Congenita</b> Tibor Salamon, MD, Sarajevo, Yugoslavia	
<b>Society Transactions</b> .....	1041
<b>News and Notes</b> .....	1044
<b>Books</b> .....	1046
<b>Instructions for Authors</b> .....	see June 1976, p 752
<b>Index to Advertisers</b> .....	1056

The Cover

You may have had to look twice to make sure this was your specialty journal—because the cover has a whole new and different look to it. We redesigned it after taking a long, hard look at our traditional covers with their contents' listings and deciding that a more contemporary appearance was in order. The result: a new, fresh look that incorporates a modern, modular graphic design. In addition, the modular design permits us to highlight the articles of major importance to you in each issue. The complete contents will continue to appear within the first few pages of the issue. We hope you like our new cover design.

IN CONTACT DERMATITIS

**VALISONE<sup>®</sup> Aerosol**

brand of  
**BETAMETHASONE VALERATE**

Aerosol 0.15% w/w (as betamethasone)

**CLINICAL CONSIDERATIONS:**

**INDICATIONS** VALISONE Aerosol is indicated, solely, for the adjunctive topical management for the relief of inflammatory manifestations of acute contact dermatitis.

**CONTRAINDICATIONS** Topical steroids are contraindicated in tuberculosis of the skin and some viral diseases of the skin (vaccinia and varicella). Hypersensitivity to any of its components is a contraindication to the use of VALISONE Aerosol. This preparation also is contraindicated for use under occlusive dressings.

**WARNINGS**

Keep away from eyes or other mucous membranes.

Avoid inhaling.

Avoid freezing of the tissue by not spraying for more than 3 seconds, at a distance not less than 6 inches.

Contents are under pressure. Do not puncture. Do not use or store near heat or open flame. Exposure to temperatures above 120° F may cause bursting. Never throw container into fire or incinerator. Keep out of reach of children.

**PRECAUTIONS** If irritation or sensitization develop with use of VALISONE Aerosol, treatment should be discontinued and appropriate therapy instituted.

In the presence of an infection, the use of an appropriate antifungal or antibacterial agent should be instituted. If a favorable response does not occur promptly, the corticosteroid should be discontinued until the infection has been adequately controlled.

If extensive areas are treated, the possibility of increased systemic absorption of the corticosteroid exists and suitable precautions should be taken. The effects of systemic absorption of steroids are reversible.

Ulceration has been reported in a few cases with use of topical corticosteroids in skin conditions which involve impaired circulation (i.e., stasis dermatitis).

**Use in women of childbearing age:** Although topical steroids have not been reported to have an adverse effect on pregnancy, the safety of their use in pregnant females has not absolutely been established. Therefore, they should not be used extensively on pregnant patients, in large amounts, or for prolonged periods of time.

**ADVERSE REACTIONS** The following local adverse reactions have been reported with topical corticosteroids.

burning sensations	hypertrichosis
itching	acneform eruptions
irritation	hypopigmentation
dryness	skin atrophy
folliculitis	secondary infections
miliaria	striae

**DOSAGE AND ADMINISTRATION** The container may be held upright or inverted during use. The spray should be directed onto the affected area from a distance of approximately 6 inches and applied for only 3 seconds.

Apply the medication three to four times a day.

For more complete details, consult package insert or Schering literature available from your Schering Representative or Professional Services Department, Schering Corporation, Kenilworth, New Jersey 07033.

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