

## Filaggrin null mutations increase the risk and persistence of hand eczema in subjects with atopic dermatitis: results from a general population study

This study investigated the association between hand eczema and filaggrin null mutations. In total, 3335 adults were questioned, patch tested and genotyped for the two most common filaggrin null mutations R501X and 2282del4. Logistic regression analyses revealed positive associations between hand eczema within the past 12 months and filaggrin null mutation status in participants with a history of atopic dermatitis (AD) [odds ratio (OR) 2.98; 95% confidence interval (CI) 1.27–7.01], but not in subjects without AD (OR 0.82; 95% CI 0.41–1.67). Subjects with combined AD and filaggrin null mutation had an earlier onset, a higher persistence of hand eczema, and a higher frequency of contact allergy (17.9% vs. 9.4%) compared with subjects with normal filaggrin status and without AD. *Br J Dermatol* 2010; 163: 113–18.

## p75 neurotrophin receptor differentiates between morphoeic basal cell carcinoma and desmoplastic trichoepithelioma: insights into the histogenesis of adnexal tumours based on embryology and hair follicle biology

This is an interesting original article which adds usefully to the problems surrounding the histopathological diagnosis of morphoeic basal cell carcinomas (mBCCs) and desmoplastic trichoepitheliomas (dTEs). Krahl and Sellheyer report that the low-affinity p75 neurotrophin receptor (p75NTR) is negative in mBCCs and positive in dTEs. Positive p75NTR and preservation of Merkel cells supports the classification of dTE as a follicular hamartoma mimicking the proximal and central outer root sheath. In contrast, the lack of p75NTR expression in mBCC and absence of Merkel cells favours a concept of mBCC as a more primitive follicular lesion with the characteristics of a carcinoma and not a hamartoma. It is suggested that p75NTR is used as a tool in the differential diagnosis between mBCC and dTE. *Br J Dermatol* 2010; 163: 136–43.

## The first *COL7A1* mutation survey in a large Spanish dystrophic epidermolysis bullosa cohort: c.6527insC disclosed as an unusually recurrent mutation

This study reports the survey of *COL7A1* mutations in 49 Spanish patients. Thirty-five mutations were identified, 20 of which are novel. Notably, the pathogenic c.6527insC mutation, previously reported in two unrelated patients, was extremely frequent in this population (46.3% of the Spanish RDEB alleles). Twelve patients homozygous for c.6527insC mutation and 14 patients compound heterozygous were examined in detail, providing useful prognosis information. *Br J Dermatol* 2010; 163: 153–9.

## Frequency of aquagenic palmoplantar keratoderma in cystic fibrosis: a new sign of cystic fibrosis?

Garçon-Michel *et al.* calculated the frequency of aquagenic palmoplantar keratoderma (APPK) among patients with cystic fibrosis (CF). Eleven of 27 patients with CF (41%) were found to have APPK. The frequency of APPK was almost three times higher among inpatients (62%) compared with outpatients (21%). It is postulated that this difference was due to occlusion caused by the gloves worn by the inpatients. The authors believe APPK is a sign of CF and screening for CF should be considered for patients presenting with APPK. *Br J Dermatol* 2010; 163: 160–4.

## Epstein–Barr virus involvement in the pathogenesis of hydroa vacciniforme: an assessment of seven adult patients with long-term follow-up

Verneuil *et al.* studied blood EBV DNA load and viral detection in skin samples of phototest-induced lesions from seven adult patients with hydroa vacciniforme (HV) compared with 35 controls with other photosensitive disorders. Blood EBV DNA load was positive in the seven patients with HV at 4–45 years after the initial eruption, and was negative in 34 of 35 controls ( $P < 0.001$ ). Levels were higher in photosensitive than in non-photosensitive patients with HV. Such a persistence of EBV infection in adult patients with typical HV has not previously been reported and might be a useful biomarker in HV. *Br J Dermatol* 2010; 163: 172–80.