



Dermatitis Herpetiformis

An informational guide from the National Foundation for Celiac Awareness (NFCA)

What is DH? Who gets it?

Dermatitis Herpetiformis, DH, is a painful skin rash that manifests as a direct result of untreated or undiagnosed celiac disease. It is commonly known as “celiac disease of the skin.”

About 15-25% of individuals with celiac disease experience DH, and men are affected more than women by a ratio of 2:1. While DH can appear at anytime, the average age of onset is between 15-40 years of age.



DH can appear anywhere on the body. However, it most frequently presents in the following areas:

- **Buttocks**
- **Elbows**
- **Knees**
- **Lower back**
- **Scalp**

What does it look like?

The hallmark sign of DH is an intensely itchy, blistering skin rash.

The onset of DH may be acute or gradual, appearing in the same location every time. DH outbreaks are very often mirrored, meaning that the rash will occur on both sides of the body in the exact same place.

While DH is a known symptom of celiac, many patients with DH will not develop any classic digestive symptoms. In fact, up to 20% of patients actually have normal small intestines when examined.

Regardless of the presentation or symptoms, a positive diagnosis of DH always indicates celiac disease! And, because DH is an autoimmune condition, patients with the skin disorder can develop similar, more serious conditions, such as cancer, if left untreated.



How is it diagnosed?

While 70–80% of DH patients have higher than normal blood IgA- tTG antibody levels, a typical celiac panel (blood test) is not considered sufficient or reliable enough to properly diagnose patients.

Instead, doctors examine the dermal papillae (cells under the top layer of skin) by performing a skin biopsy, the gold standard in diagnosing and detecting DH.

Can it be treated?

Like celiac disease, DH is a chronic autoimmune condition triggered by the consumption of gluten, and can only be treated through a lifelong gluten-free diet.

Skin contact with gluten-containing foods and products has not been shown to cause DH outbreaks.

While a strict gluten-free diet will eventually resolve the outward signs and symptoms of DH, it may take several weeks– even months– for skin to completely heal. As a result, Dapsone oral medication is often prescribed to help eliminate the uncomfortable DH symptoms until the gluten-free diet takes full therapeutic affect.

Remission

DH has been known, in some cases, to go into remission, whether or not patients are adhering to a gluten-free diet. Research indicates that DH remission is both spontaneous and only experienced in a very small percentage of patients (about 12%).

However, patients diagnosed with DH should NOT abandon a gluten-free diet at anytime, regardless of an apparent remission.

Sources

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- NIH Consensus Development Conference on Celiac Disease, June 28th-30th, 2004.
- Remission in Dermatitis Hepetiformis, Arch of Dermatol. 2011; 147(3):301-305.

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