

AN INVESTIGATION INTO A CASE OF PAPULAR URTICARIA
CAUSED BY A PREDATORY MITE *CHEYLETUS MALACCENSIS* OUD.
(ACARI: CHEYLETIDAE)

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A middle age Asian male subject was investigated for a serious skin problem which was first thought to be associated with house dust mite allergy since his history included involvement in laboratory work dealing with these allergens. The lesions first appeared as intensively itchy eczematous patches which were excoriated due to scratching. A skin-prick test with *Dermatophagoides pteronyssinus* extract was positive with +3 reaction. Mite and allergen avoidance measures employing an acaricide and bedding covers were taken and the symptoms subsided.

However, after 3 months symptoms recurred and further investigation using the more specific patch-test was done. D.P. extract and the crude allergens prepared from the mites and their excreta were used and all were negative. Analysis of the dust sample collected from the bedding revealed the presence of *Cheyletus malaccensis* together with its prey *D. pteronyssinus* in large numbers. This predatory mite was suspected as the cause of the skin lesions which by that time had become more discrete papules arranged in groups occurring on both the exposed and unexposed parts of the body. *C. malaccensis* has been proven to feed on man and caused papular reactions in Japan although this mite is not generally regarded as a causative agent in bite reactions in Britain. The beddings and carpets were treated with Actomite and Sumithrin alternately in the various episodes of recurrence that followed during a period of 2 years. This predatory mite is found occasionally in the dust samples but its presence does not necessarily become a threat until and unless there is a change in its behaviour and the predator – prey ratio. Its role in the bite reactions may be suspected when the symptoms do not respond to the conventional insecticides applied, the inflicting insect is not detected, cheyletid mites are present in the beddings in high numbers and if the symptoms respond to acaricide spraying it may further support the diagnosis. Moreover, the specific diagnosis can be made using a scratch-test and pressing the body fluids of the mite into the skin and looking for the immediate and delayed reactions. This mite may be the cause of problematic bite reactions where the arthropod responsible is not detected.