## From the Poet . . .

February 9

Dear Dr Fischer,

Thank you for reading my letter. I am a doctor working in the northwest of Ireland, training to be a family physician.

Every time I open a journal, there is a story about some obscure bacteria that only grow on the iced windowpane of a lab slide, or a letter from an aging surgeon who found a strange-coloured growth in a patient's brain pushing all her thoughts and memories to one side and who wants the growth named after him. Yet whenever I see a patient, I just want to write a poem about him or paint a picture. I just wonder if any other doctor sees through the same watercolours as me.

Maybe you might publish these poems, and we'll listen for the sound of a reply.

Thank you, Michael O'Reilly (aged 26)

April 8

Dear Dr Fischer,

Thank you for writing to me to tell me you would like to publish my poems. I am very honoured to be considered by your excellent journal, and I do hope the poems strike a chord in the people who read the journal.

There is a poet, painter, and musician in every doctor, subdued by a fear of being ridiculed in a profession dominated by machines and terminology far beyond the human touch the dignity of human illness deserves.

Again, many thanks.

Yours sincerely, Michael O'Reilly

## Tips from Practice

## Basketball Pebble Fingers

"Basketball pebble fingers" is a mechanical contact dermatitis caused by basketball handling. Although a variety of medical problems associated with the sport of basketball have been reported, 1–3 and mechanical forces have been recognized as important factors in dermatitis, 3–5 this particular condition has not previously been reported in the literature.

This condition consists of irritation of the fingertips and finger pads in basketball players. It is caused by repeated contact with the surface of the basketball, and despite its absence from the literature, is well known among basketball players. The fingertips and finger pads sustain fine abrasions, develop petechiae and become very sore and tender. Similar lesions occur from friction and pressure on the thumb in weightlifters.6 The finger pads may develop a glazed appearance, which has also been reported in contact dermatitis among paper industry workers and in newspaper deliverers.4

These lesions occur most frequently during excessively long sessions of play or when there is resumption of play after a long period of inactivity. Three factors contribute to the microtrauma that is involved: the pebbled surface of the basketball, fine nicks in the surface of the ball, and length of play. Outdoor basketball courts with abrasive surfaces, in particular, cause nicking of the ball surface, which in turn causes fingertip abrasion.

Mechanical trauma in general is an underrecognized, ubiquitous, exacerbating factor in irritant and contact dermatitis.<sup>3–5</sup> It may predispose to infection and significantly contribute to occupation-related morbidity. Identification and control of the source of repeated trauma is vital in treating dermatitis that has a mechanical component. The condition is self-healing if further trauma is avoided.

Basketball pebble fingers may have a significant impact on ball handling and concentration. Consequently, competitive performance may be adversely affected. Application of a topical ointment or plain petroleum jelly to the fingers soothes and may prevent injury if applied sparingly before play. Prevention hinges on moderation of activity and limiting play on abrasive surfaces. Recognition and prevention of this condition will allow better performance and greater enjoyment of this popular sport.

Ralph O. Bischof, MD Fred W. Markham, MD Jefferson Medical College Philadelphia, Pennsylvania

## References

- Sonzogni JJ, Gross ML. Assessment and treatment of basketball injuries. Clin Sports Med 1993; 12:221–37.
- 2. Wilson RL, McGinty LD. Common hand and wrist injuries in basketball players. Clin Sports Med 1993; 12:265–91.
- 3. Bergfeld WF. Trauma, sports, and the skin. Am J Ind Med 1985; 8:403–13.
- 4. Wilkinson DS. Dermatitis from repeated trauma to the skin. Am J Ind Med 1985; 8:307–17.
- 5. Kligman AM. The chronic effects of repeated mechanical trauma to the skin. Am J Ind Med 1985; 8:257–64.
- Scott MJ, Scott NI, Scott LM. Dermatologic stigmata in sports: weightlifting. Cutis 1992; 50:141–5.