**Suppl. Table 1.** Eleven-item questionnaire

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| **Item No.** | | **Questions** |
| 1 | Your age | |
| 2 | Your gender | |
| 3 | Your occupation | |
| 4 | Do you currently have hand eczema; Prior history of hand eczema, but not now | |
| 5 | Do you have psoriasis or dermatitis other than hand eczema? | |
| 6 | Do your hands frequently contact any of following stuff: disinfectants, detergents, hair dye products, cosmetics, lubricants, building materials, others? | |
| 7 | Do you do wet-work? | |
| 8 | How many times do you wash your hands? Do you usually use detergent to wash your hands? | |
| 9 | Do you usually use moisturizers after washing hands? | |
| 10 | Do you have a personal history of allergy (food allergy, rhinitis, conjunctivitis, asthma)? | |
| 11 | Do your other family members have a history of allergy (food allergy, rhinitis, conjunctivitis, asthma) | |

‘Wet-work’ is defined as immersing hands in liquids, or wearing occlusive gloves for more than 2 hours per work shift, or washing hands more than 20 times per work shift15.