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ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

A RARE CASE OF ACUTE GENERALISED EXANTHEMATOUS PUSTULOSIS (A. G. E. P.) DUE TO PIPERACILLIN-TAZOBACTAM.

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Background: Acute Generalised Exanthematous Pustulosis is a rare, cutaneous adverse reaction, clinically characterized by small, sterile pustules on an erythematous base. An acute onset has been described with a wide distribution throughout the body surface apart from palms, feet and mucosa. Fever, neutrophilia or eosonophilia may coexist. The average self-limitation time is 5 days after the causative factor has been discharged. We describe a rare, confirmed AGEP case induced by piperacillin-tazobactam, a widely used b-lactam antimicrobial drug.

Observation: An 83-year-old woman was admitted to our clinic from a nursing home because of fever. Fever was attributed to both urinary tract infection (permanent bladder catheter) and soft tissue infection (extensive pressure ulcers). She was therefore treated empirically with piperacillin-tazobactam. Four days after she developed a drug eruption with the AGEP features. We immediately discontinued piperacillin-tazobactam and performed direct Coombs test (positive), quantitative serum immunoglobulins test (very high IgE levels) and skin biopsy (typical histopathologic image of AGEP with subcorneal pustule, intraepidermal pustule, subepethelial vesiculation, oedematous dermal papillae, perivascular inflammatory infiltration). We treated the eruption with local corticosteroids and after one week of drug discontinuation the patient demonstrated full recovery.

Key message: AGEP should be included in the differential diagnosis of a drug eruption, when admitting piperacillin-tazobactam, in order to manage our patients appropriately.





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