



ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

ACQUIRED LABIAL SYNECHIAE SECONDARY TO STEVENS-JOHNSON SYNDROME

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Background: Stevens-Johnson syndrome (SJS) is caused by abnormal immunologic reactions, normally after exposure to drugs or infections. It is a severe and rare disease, belonging to the group of toxic epidermal necrolysis (TEN). All mucous membranes can be reached: ocular, genital, esophageal, nasal or oral. These complications can lead to aesthetic and functional damage such as blindness or dyspareunia. Of these mucosal complications, labial synechiae are the rarest. We report labial synechia complicating SJS to lamotrigine.

Observation: A 19-year-old Moroccan girl presented with SJS secondary to the use of lamotrigine. The patient had been prescribed 03 weeks earlier lamotrigine to control an epileptic seizure. Histological examination of a skin biopsy was in favor of the SJS. Mucosal injury was associated with conjunctivitis and hyperalgesic stomatitis. Ten days later, the patient's mouth opening was limited and she presented bilateral adhesions between the upper and lower lips of 6 mm on the left and 3 mm on the right resulting in aesthetic and functional damage. These synechias were not painful but resulted in obvious functional damage. No ocular or genital synechia was found. Lip movements with maximum mouth opening were recommended several times a day until full healing. A surgical treatment of the labial synechiae was then suggested by section and then sutures, but the patient refused the surgical procedure. Genital and ocular monitoring was proposed.

Key message: Complications of mucosal involvement must be prevented by early, adapted and multidisciplinary management. We suggest that minor attention to the oral cavity by occasionally moving the lips during the healing phase could have prevented such adhesions and could have circumvented the need for corrective therapy. The treatment of pain should not be neglected since it avoids analgesic attitudes that provide complications.

