



ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

BULLOUS FIXED DRUG ERUPTION: A POTENTIAL DIAGNOSTIC PITFALL: A STUDY OF 18 CASES FROM A TERTIARY CARE CENTER

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Introduction: Bullous fixed drug eruption (BFDE) is a rare adverse drug reaction characterized by localized or generalized blisters and erosions which can be confused with Stevens-Johnson syndrome, toxic epidermal necrolysis, major erythema multiforme and autoimmune bullous dermatosis.

Objective: The aim of our study was to assess the epidemiological, clinical and therapeutic features and outcome of BFDE.

Material and methods: A retrospective and descriptive study collecting all observations of BFDE was conducted over an 18-year period (2000-2017). The diagnosis of BFDE was confirmed by histological examination and all the patients underwent pharmacovigilance investigation.

Results: Totally, 18 cases were enrolled in our study. The mean age was 57.9 years with a sex-ratio M/F of 1. BFDE was localized in 8 cases and generalized in 10 cases. It was the first episode of FDE in 11 patients and a recurrence in 7 patients. A direct immunofluorescence study was done in 5 patients and was negative. Drugs involved in the genesis of BFDE in our study were mainly non steroidal anti-inflammatory drugs in 10 patients and antibiotics in 5 cases. Drug patch tests were done in four patients on the residual plaques of FDE and were positive to the suspected drug. A favorable outcome was observed in all our patients under treatment and after drug withdrawal.

Conclusions: Fixed drug eruption is usually a benign drug reaction. BFDE is rare and could be severe especially when it presents as a generalized erosive eruption. Drugs involved in the genesis of BFDE are mainly non steroidal anti-inflammatory drugs followed by antibiotics.

