



ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

CHARACTERISTICS OF RELAPSES IN DRUG REACTION WITH EOSINOPHILIA AND SYSTEMIC SYMPTOMS (DRESS)

Fatma Frikha⁽¹⁾ - Meriem Amouri⁽¹⁾ - Emna Bahloul⁽¹⁾ - Abderrahmen Masmoudi⁽¹⁾ - Madiha Mseddi⁽¹⁾ - Sonia Boudaya⁽¹⁾ - Hamida Turki⁽¹⁾

Hedi Chaker Hospital, Dermatology, Sfax, Tunisia⁽¹⁾

Introduction: Drug reaction with eosinophilia and systemic symptoms (DRESS) is a severe drug-induced reaction characterized by rash, fever, lymphadenopathy, hepatitis, hematologic abnormalities and/or internal organ involvement. As compared with other drug reactions, resolution of DRESS is slower, beset by relapses or flares.

Objective: precise the main characteristic of DRESS relapses.

Patients and methods: we conducted a retrospective study and enrolled all cases of DRESS during 18years (2001-2017). Relapse of DRESS was defined as adverse cutaneous reaction and/or blood tests abnormalities appeared after healing of DRESS symptoms.

Results: Among 64 cases of DRESS, six patients (9.4%) presented recurrences. They all were females with a mean age of 47.2 years (range 30-58 years). Culprit drugs were allopurinol (2 cases), carbamazepin (2 cases), phenobarbital (1 case) and sulfasalazin (1 case). All cases improved after drug discontinuation. Four patients required steroids because of organ involvement. Prednisolone (1 mg/kg/day in 3 cases; 0.5 mg/kg/day in 1 case) was given for 5-25 days with a mean duration of 12 days (loading dose). Steroids were then gradually tapered off. Two patients had a single recurrence within 11 and 15 days, whereas four patients had two recurrences within a mean of 10.2 and 39 days for the first and the second respectively. Trigger factors, identified in 8 cases, included tapering of steroids (5 cases) or drug intake (paracetamol, ceftriaxon or trihexyphenidyl each in 1 case). Rash was associated with pruritus (10 cases), fever (3 cases), eosinophilia (6 cases), peripheral lymphadenopathy (1 case) and elevated liver enzymes (1 case). Serology for hepatitis B and C, EBV and CMV, when performed (4 cases), was negative. Detection of HHV-6, HHV-7 infection and skin tests were not performed.

Conclusion: Relapses or 'flare up' in DRESS are rare. They may occur within days to several weeks after the first diagnosis of DRESS, without any new culprit drug intake. They may be due either to virus reactivation (HHV-6, HHV-7, EBV or/and CMV) or to drug cosensitization.

