ABSTRACT BOOK ABSTRACTS



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ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

CUTANEOUS ADVERSE DRUG REACTIONS: A 5-YEAR REVIEW (2013 – 2017) IN A STATE GENERAL HOSPITAL IN PENINSULAR MALAYSIA

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Introduction: There are many types of cutaneous adverse drug reactions (CADRs), from mild pruritus to severe life-threatening conditions such as Stevens-Johnson syndrome (SJS) and toxic epidermal necrolysis (TEN), with significant morbidity and mortality.

Objective: Awareness of local epidemiology of CADR may play a vital role in future clinical management protocols.

Materials and Methods: A retrospective review of all patients referred to the Department of Dermatology of Hospital Tengku Ampuan Afzan, Kuantan, Pahang with CADR from 2013 to 2017 was carried out to determine the epidemiology of CADR in the local population.

Results: A total of 143 reactions involving 137 patients were recorded. Maculopapular eruption (MPE) (38 cases) was the most frequent CADR, followed by SJS (16), photodermatitis (16) and drug-related eosinophilia with systemic symptoms (DRESS) (12) among others. The median age was 48 years (1 – 92) and most (58.4%) were male. The median time to onset of CADR was 7 days. The overall CADR rate was 1.4% (yearly CADR rate range: 0.2% – 3.1%), with the highest rate recorded for indigenous peoples and foreigners (2.6% and 18.2%, respectively). Fourteen (9.8%) reactions were due to traditional and complimentary medicine (TCM), followed by allopurinol and cloxacillin (12 and 10 cases, respectively). Antimicrobials as a group were the main culprits, contributing 44% of all CADRs. Eight patients died, including three from TEN and two from dapsone hypersensitivity syndrome, resulting in a mortality rate of 5.84%.

Conclusions: MPE was the commonest CADR encountered in our center, while the most common culprit drug was TCM, most causing MPE but in two cases, death due to TEN. Antimicrobials was the group of medication causing the most CADRs. Awareness of this local data is crucial in ensuring the judicious use of antimicrobials in our practice, as well as stringent local regulations on the sale of TCM.





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