



ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

DIAZEPAM-ASSOCIATED SWEET'S SYNDROME

Anita Najdova⁽¹⁾ - Tiho Cvetkovik⁽¹⁾ - Silvija Duma⁽¹⁾ - Katerina Damevska⁽¹⁾ - Ivana Dohcheva Karajovanov⁽¹⁾

Clinic Of Dermatology, Ss. Cyril And Methodius University, Skopje, Macedonia⁽¹⁾

Background: Sweet syndrome is a neutrophilic dermatosis characterized by rapid onset of fever, leukocytosis and erythematous papules, plaques and nodules. It has been associated with autoimmune processes, malignancies, infections, and inflammatory bowel disease. Less than 5% of all cases present with drug-induced variant. We present a rare case of diazepam - induced Sweet syndrome.

Observation: A 35-year-old, otherwise healthy woman was referred with fever, arthralgia and a skin eruption with a rapid extension. One month prior, the patient presented to her GP complaining of anxiety, and she was prescribed diazepam tablets 2mg, once or twice per day. Eight days after drug initiation, the patient developed erythematous plaques on her back. Her GP decided to discontinue diazepam, suspecting its potential involvement in the adverse reaction that occurred. Seven days after diazepam suspension, the cutaneous lesions progressively resolved. Four weeks later, after a stressful life situation, the diazepam was re-introduced, followed by rapid onset of fever (39°C), fatigue, myalgias, arthralgias, and a cutaneous eruption. The patient denied using any nonprescription medications. On examination, she was found to have slightly raised red-purple plagues on her back, and several plaques were coalescent into larger lesions. Blood tests showed neutrophilic leukocytosis (22 × $10^{3}/\mu$ L), and an inflammatory state (ESR 80 mm/h). Histological examination revealed dense neutrophilic infiltration without evidence of leukocytoclastic vasculitis. A diagnosis of diazepam-induced Sweet's syndrome was made. Rapid resolution was observed after drug discontinuation and treatment with systemic corticosteroids.

Key message: Sweet's syndrome associated with drug is uncommon. Many reports do not provide evidence supporting a definite causal relation between the disease and the drug. Our patient fulfilled the criteria for drug-induced Sweet's syndrome established by Walker and Cohen, including temporal relationship between drug ingestion and clinical presentation, temporally-related recurrence after oral challenge, and temporally-related resolution of lesions after drug withdrawal.





International League of Dermatological Societies Skin Health for the World

