



ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

DRESS SYNDROME: CUTANEOUS PHENOTYPE AND SYSTEMIC INVOLVEMENT (62 CASES)

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Introduction: The mortality rate associated with DRESS Syndrome is estimated at 10%, secondary for the most part to liver failure. To date, there are still no recognized clinical phenotypic markers of severity.

Objective: The purpose of this work is to verify if the clinical phenotype can be a prognostic indicator in the DRESS Syndrome.

Materials and Methods: Retrospective study collating patients with DRESS from January 2000 to December 2018. All patients met the diagnostic criteria of REGISCAR. Epidemiological data, skin characteristics and evaluation of systemic participation of each patient were analyzed using SPSS 16.0 software

Results: Sixty-two patients were collected (33 women, 29 men). The rash was: urticated papular exanthem (47 cases), exfoliative erythroderma (12 cases), erythema multiforme-like (2 cases), morbiliform erythema (1 case). Thirty-three patients had liver function disturbances in excess of the REGISCAR severity threshold, 15 patients had renal impairment, 7 had pulmonary involvement and only one had muscular involvement. Five patients had more than one visceral involvement. No deaths recorded. Patients with urticated papular exanthema (UPE) had more severe hepatic impairment compared to other clinical phenotypes, but this difference was not statistically significant. Of the 15 cases with renal involvement, 13 had (UPE) and 2 had exfoliative erythroderma (EE). Of the 7 cases of pulmonary involvement, four had UPE and the remaining 3 had an EE. These associations were not significant.

Conclusions: Our series of 62 cases of DRESS syndrome did not demonstrate a significant correlation between the clinical phenotype and the degree of systemic involvement, including no significant association between erythema multiforme-like and severe hepatic impairment, reported by the Walsh's prospective series of 27 cases. Further studies involving a larger series of patients would be needed to identify the potential existence of this prognostic association.

