IMATINIB INDUCED MELASMA: A CASE SERIES

Harshal Ranglani

Goa Medical College, Department Of Dermatology, Venereology And Leprology, Panaji, India

Background: Imatinib is a tyrosine kinase inhibitor frequently used in oncology for the treatment of chronic myeloid leukemia, gastrointestinal stromal tumours (GIST), acute myelogenous leukemia and myelodysplastic/myeloproliferative diseases. There are a variety of cutaneous adverse effects associated with its use. Here, we describe a series of patients who developed imatinib induced melasma-like hyperpigmentation on treatment.

Observation: Five cases (4 males and 1 female) presented with complaints of progressive hyperpigmentation over the face beginning shortly after initiation of chemotherapy for their internal malignancies. Four of the patients were suffering from chronic myeloid leukemia whereas one was a case of gastrointestinal stromal tumor. All patients were receiving imatinib mesylate 400 mg once a day. There were not on any other chemotherapeutic agent. The average duration between the onset of treatment and the pigmentation was 4.2 months. On physical examination, there was presence of multiple, well defined, dark brown-tan, hyperpigmented patches predominantly over the forehead and cheeks. Oral cavity, nails and genital mucosa were unremarkable. All other causes of facial hyperpigmentation were ruled out. The dermoscopic findings included a pseudoreticular pattern. Histopathologic evaluation could be done in only two of the patients and this revealed increased basal layer pigmentation. There was no evidence of dermal melanophages. One of the patients also had periorbital oedema, another known side effect of imatinib. Patients were advised sun protection and topical skin lightening agents, without stoppage of imatinib.

Key message: Generalized hypopigmentation is a commonly reported side effect of imatinib while hyperpigmentation is unusual. The underlying mechanism for development of melasma-like hyperpigmentation following imatinib intake remains unclear. Patients may need to be counselled and forewarned of this side effect. Sun protection measures and skin lightening agents may have to be instituted at an early stage.