



ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

## **LICHENOID DRUG ERUPTION AFTER HEPATITIS B VACCINATION: CASE REPORT**

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**Background:** A lichenoid drug eruption (LDE) is characterized by symmetrical eruption of erythematous or violaceous papules similar to those of lichen planus (LP), in the trunk and extremities, it is often clinically and histopathologically indistinguishable from LP.

The time interval between the onset of the triggering drug and the onset of cutaneous lesions may vary from months to years. In the scientific literature, there are reports of LP or LDE after certain vaccines[1]. Although there is a temporal nexus, the pathophysiological mechanism has not yet been elucidated.

Female, 66 years old, refers the appearance of erythematous, pruritic plaques all over the tegument, 3 days after the 1st dose of Hepatitis B (HBV) and Tetanus Vaccination.

The patient reports continued use of topical timolol for 5 months prior to LDE. We opted not to discontinue it.

Anatomopathological study was compatible with lichen planus. Systemic corticosteroid therapy 0.5 mg/kg/day was introduced with remission of the lesions after 2 months of treatment. Serologies for HIV, Hepatitis C, and VDRL were non-reactive and susceptible to Hepatitis B.

**Observation:** The understanding of LP and LDE after vaccination is limited to reports and case series. Approximately 50 cases of LDE post HBV have been described worldwide.

The causative factor of LDE after HBV has not yet been understood. Adverse events following vaccination usually include reactions, particularly hypersensitivity to the constituents of the vaccine, notably aluminum, egg albumin, thimerosal, potassium phosphate monobasic and dibasic sodium phosphate.

Regarding topical timolol, LDE four days after the introduction was reported, however, the patient presented LDE only when the dose was changed.<sup>8</sup>

**Key message:** LDE is a rare adverse event to vaccines, being more common after HBV. When encountering patients presenting with an LDE-compatible clinic, it is essential to investigate the history of recent vaccinations, especially HBV.

