



ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

MANAGEMENT OF SEVERE CUTANEOUS ADVERSE DRUG REACTIONS:REPORT OF 2 TEN CASES

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Background: Severe cutaneous adverse drug reactions, such as toxic epidermal necrolysis are life threatening. Patients are often complicated by secondary infection, impairment of digestive tract, or multi-organ function failure. Severe cutaneous adverse drug reactions induced by several drugs have been shown to have significant associations with specific alleles of human leukocyte antigen (HLA) genes. For example, hypersensitivity to Allopurinol has been proposed to be associated with allele 58:01 of HLA-B gene (terms HLA-B * 58:01).

Observation: The clinical manifestation and treatment of 2 toxic epidermal necrolysis with complications were reported. Both patients were allergic to Allopurinol and HLA-B * 58:01 were positive. Both patients were given sufficient corticosteroids as soon as possible, and additional intravenous immunoglobulin were given at the same time. Careful skin care and supportive therapies were given.

Key message: HLA-B * 58:01 test before the prescription of Allopurinol is of great importance. Early use of sufficient corticosteroids and intravenous immunoglobulin is necessary for toxic epidermal necrolysis patients. Complications should be taken care of carefully.

