



ADVERSE DRUG REACTIONS, INCLUDING SJS, TEN

UNILATERAL GYNECOMASTIA WITH ORAL FINESTERIDE- 3 CASE REPORTS

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Background: A relatively safe option for the treatment of androgenetic alopecia, Oral Finasteride a type-II 5 α -reductase inhibitor has been implicated in causing gynecomastia, even at a minimal dose of 1mg/day. Although finasteride's potential adverse effects like gynecomastia have been considered to be rare, its frequency/ incidence have been increasingly reported.

This has brought us to report three of our patients who developed gynecomastia quite early during the treatment period and want to emphasize that this adverse effect seems more common than it has been reported.

Observations: 3 males, between the ages 20-30 years who presented with androgenetic alopecia were started on oral finasteride 1mg/day and topical 5% minoxidil. The three of them developed unilateral gynecomastia within 6 weeks of initiation of treatment. 2 of the patients had tenderness in the region. All other possible causes of gynecomastia were ruled out. Oral finasteride was stopped immediately and the patients were reviewed at regular intervals. The breast tenderness decreased by 3months post cessation of oral finasteride in the two patients, but the unilateral breast enlargement however, persisted in all the three patients.

Key message: The importance lies in the fact that this adverse effect has presented very early in the course of the treatment in our patients. This stresses the need to have a watchful eye even for the rarest of the adverse effects. Educating the patient prior to initiation of therapy and regular physical examination at each visit are equally important in identifying this condition and its further management. To summarize, the true incidence of gynecomastia due to finasteride 1mg/day is not known. This calls for some placebo-controlled studies in order to identify the actual frequency of this not so uncommon adverse effect.

