COMPARISON BETWEEN ORAL PENTOXIFYLLINE + CORTICOSTEROID AND ORAL CORTICOSTEROID ALONE FOR SEVERE ERYTHEMA NODOSUM LEPROSUM: A RANDOMIZED, DOUBLE-BLIND CONTROLLED TRIAL

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Introduction: Severe erythema nodosum leprosum (ENL) is a difficult leprosy complication. Systemic corticosteroid is the main therapy, but long term use cause side effects and higher relapse rate. Additional safe and effective therapy is needed to decrease corticosteroid dependency. Until recently, there isn’t study about the effectiveness of oral pentoxifylline+corticosteroid combination in Indonesia.

Objective: To assess the effectiveness and safety of oral pentoxifylline+corticosteroid combination.

Material and Methods: 29 subjects were allocated randomly into two groups which received oral pentoxifylline+methylprednisolone, and oral placebo+methylprednisolone for 12 weeks. The starting dose of pentoxifylline was 400 mg thrice daily for 4 weeks, tapered to 400 mg daily every 4 weeks. Methylprednisolone was used based on WHO guideline.

Results: At the end of the study, the median of cutaneous reaction severity assessment (RSA) score in pentoxifylline vs placebo group was 4 (0-5) vs 3 (0-5). Average systemic RSA score in pentoxifylline vs placebo group was 0.69±1.797 vs 1.07±1.624. Average total corticosteroid doses in pentoxifylline vs placebo group was 160.61±25.91 mg vs 139.73±36.64 mg. Average resolution time in pentoxifylline vs placebo group was 6±3.559 weeks vs 6.67±4.047 weeks. Average change of pain VAS score in pentoxifylline vs placebo group was 4.07±2.06 vs 2.73±2.65. No statistically significant difference (p>0.05) was found in all parameters, including side effects.

Conclusions: Combination of oral pentoxifylline+corticosteroid was not proven to be more effective. Both are safe.