

Loratadine/paracetamol/ascorbic acid/pheniramine

Fixed drug eruption: 2 case reports

Two men developed fixed drug eruptions (FDEs) during treatment with paracetamol/ascorbic acid/pheniramine [Fervex] for flu syndrome or loratadine [*dosages, routes and durations of treatment not stated*].

Patient 1, a 58-year-old man, occasionally took paracetamol [acetaminophen] without any adverse effects. In 2004, he received paracetamol/ascorbic acid/pheniramine. He developed an erythematous, pruritic skin lesion on his penis associated with a burning sensation. A diagnosis of FDE was made. The lesion resolved within 7 days, with residual hyperpigmentation noted. Two other episodes of a burning sensation following self-medication with paracetamol/ascorbic acid/pheniramine were reported by the man. The lesion did not recur after ingestion of paracetamol and ascorbic acid in January 2009.

Patient 2, a 64-year-old man, was receiving pyridostigmine [Mestinon], corticosteroids and metformin. He developed three erythematous and macular lesions on the bottom and back after receiving loratadine [*indication not stated*], presenting twice since 2006. He inadvertently ingested loratadine on 24 April. On the following day, he reported the recurrence of previous lesions and the development of additional lesions. Fixed drug eruption was diagnosed [*outcome not stated*].

Using the French method of imputability produced intrinsic scores of 14, or very likely, for pheniramine and for loratadine.

Lakhoua G, et al. Fixed Drug Eruption Related to H1 Anti-Histamines. 10th Annual Meeting of the International Society of Pharmacovigilance : abstr. 118, 3 Nov 2010. Available from: URL: <http://adisonline.com/drugsafety/citation/2010/33100/abstracts%5f%5f10th%5fisop%5fannual%5fmeeting.9.aspx> - Tunisia 803042704