

Nifedipine/antihypertensives

Phototoxicity: 3 case reports

Case 1: A 67-year-old woman who had been taking nifedipine 40 mg/day and chlorthalidone 25 mg/day for some years presented with several years' history of nonpruritic erythema and oedema of sun exposed areas which worsened each summer. Examination revealed low UVA MED and UVB MED values (3.9 J/cm² and 240 mJ/cm², respectively) and a speckled pattern of antinuclear IgM at 1/160 end point. Her MED values remained low despite substitution of indapamide and enalapril for chlorthalidone and nifedipine, respectively.

Case 2: Erythematous itching and scaling lesions of sun exposed areas developed in a 67-year-old woman who had been taking dipyridamole 150 mg/day and indapamide 2.5 mg/day for years for hypertension. Her blood glucose and lactic dehydrogenase levels were slightly elevated, IgE levels were high and her MED value was low. Her antihypertensive medication was changed to nifedipine 40 mg/day, but MED values were still low 18 months later.

Case 3: A 45-year-old woman taking ketoprofen 400 mg/day and nifedipine 40 mg/day developed itching erythema and oedema of sun exposed areas. Ketoprofen was withdrawn, but the patient relapsed 3 months later.

After *in vitro* and *in vivo* study, the authors suggested that '*... nifedipine is phototoxic only at very high dosages and the clinical relevance of this characteristic is probably a minor one.*' It was not possible to exclude that nifedipine metabolites may be phototoxic at lower concentrations.

Guarrera M, Parodi A, Rebora A. Is nifedipine phototoxic? *Photodermatology Photoimmunology and Photomedicine* 7: 25-27, Feb 1990 1195

Nortriptyline

Black tongue: case report

'*The cause of black tongue associated with tricyclic antidepressants remains unknown.*' Black discoloration of the tongue occurred in a 24-year-old man on day 10 of treatment with oral nortriptyline for major depression. Nortriptyline concentration in saliva and plasma and the saliva: plasma

ratio in the patient was similar to that of 28 control patients who had been receiving nortriptyline without tongue discoloration.

Vitiello B, Yeung J, Friedman E. Plasma and salivary nortriptyline concentrations in a patient with black tongue. *Clinical Pharmacy* 9: 421-422, Jun 1990 1227

NSAIDs

see Captopril interaction

Oral contraceptives

see Penicillamine/oral contraceptives

Oxytetracycline/doxycycline

Oesophageal ulcers in children: 2 case reports

Kato S, Komatsu K, Harada Y. Medication-induced esophagitis in children. *Gastroenterologia Japonica* 25: 485-488, Aug 1990 1358

Papaverine

Pyogenic granuloma following intrapenile injection: case report

'*This unusual outcome is added to the list of potential complications of penile papaverine injection therapy for impotence.*' A pyogenic vascular granuloma developed 6-7 days after a 40-year-old man with insulin-dependent diabetes mellitus was given a test dose of penile papaverine 60mg. He received this into the right corporeal body of the penis as part of an evaluation for erectile dysfunction, and the granuloma developed in the left corporeal body opposite the injection site. Treatments with heat, antibacterials and anti-inflammatory agents were unsuccessful, and the mass was excised 8 weeks after the initial injection. The granuloma measured 2 × 1 × 0.6 cm. The patient recovered uneventfully.

Summers JL. Pyogenic granuloma: an unusual complication of papaverine injection therapy for impotence. *Journal of Urology* 143: 1227-1228, Jun 1990 1332

Paracetamol/caffeine/chlorphenamine/phenylephrine

Familial pemphigus: case report

'*The pemphigus in our patient was probably triggered by the drug that she had*

been taking before the onset of the skin lesions.' This conclusion is based principally on circumstantial evidence and is supported by positive macrophage migration inhibition (MIF) test results.

Erosive eruptions on the upper abdomen and the chest, which progressed on to the upper back and scalp, developed in a 56-year-old woman 2 weeks after taking a combination drug formulation for a common cold and an outbreak of herpes virus. The combination drug consisted of paracetamol [acetaminophen], caffeine, chlorphenamine and phenylephrine.

On presentation, 3 months after symptom onset, the diagnosis was confirmed with histopathological examination of a biopsy specimen, direct immunofluorescent microscopy of perilesional and uninvolved tissue, and by indirect immunofluorescence. The MIF test was positive for the combination drug used.

Brenner A, Hodak E, Dascalu D, Lurie R, Wolf R. A possible case of drug-induced familial pemphigus. *Acta Dermato-Venerologica* 70: 357-358, Apr 1990 1378

Pemoline

Liver disorders in a child: case report

Elitsur Y. Pemoline (Cylert)-induced hepatotoxicity. *Journal of Pediatric Gastroenterology and Nutrition* 11: 143-144, Jul 1990 1382

Penicillamine

First report of persistent neurological disease in a previously asymptomatic patient with Wilson's disease: case report

'*... To our knowledge there are no reports of neurologically asymptomatic patients [with Wilson's disease] developing persistent neurological symptoms and signs after beginning treatment [with penicillamine].*'

Personality changes and neurological symptoms developed in a 28-year-old man with Wilson's disease several weeks after starting penicillamine 1.5 g/day. The patient had been asymptomatic prior to beginning penicillamine therapy; earlier computerised tomography of the brain showed bilateral putamenal lucencies and an ophthalmologist noted bilateral Kayser-Fleischer rings. The patient had cirrhosis of the liver and his plasma ceruloplasmin level was decreased > 2-fold and urinary