

TOXIC EPIDERMAL NECROLYSIS PROBABLY DUE TO CHEMOTHERAPY: A CASE REPORT

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Purpose:

To report a case of toxic epidermal necrolysis (TEN) after abiraterone and zoledronic acid exposure.

Material and methods:

Retrospective review of

Electronic medical record (IANUS®)
Records of chemotherapy ordered and dispensed (Farmis®, Silicon®)

Literature search (until March 2014)

Pubmed + EudraVigilance database
"Abiraterone AND TEN"
"Zoledronic AND TEN"

The suspicion was reported to the pharmacovigilance centre

Results:



74 year-old male

No medication allergies

Prostate adenocarcinoma (diagnosed in 2004)

2nd line treatment:

Abiraterone 1000mg/day

Prednisone 10 mg/day

Zoledronic (adjusted dosing for renal function)

Pharmacovigilance centre

48 h after zoledronic administration (15 days after starting abiraterone) ...

Fever + pruriginous erythema

Chest
Face
Oral/nasal mucose
Dorsum of hands

70 % body surface area

Scorten scale ≥ 4
Mortality $\geq 60\%$

Supportive care

2 weeks

Hospital discharge

No case report in published literature.
First case report in EudraVigilance for abiraterone and 7th for zoledronic.

He was not re-exposed to the suspected offending agents zoledronic and abiraterone.

Causality assessment : POSSIBLE for both medications

Conclusions:

TEN is a rare life-threatening reaction; the evaluation and report of these severe reactions that are associated with newly marketed drug therapies by health care professionals is important.

Postmarketing drug experience is needed to develop an accurate security profile.