Adverse cutaneous drug reactions

Sir,
I have read the valuable manuscript entitled: “Profile of adverse cutaneous drug reactions (ACDRs) in Dermatology Department of University Hospital in Center of Iran.” Mokhtari F., JRMS August 2014, page. It is about a very important challenging area in the field of medicine.

The cutaneous side effects of several medications specially antibiotics and anticonvulsants may interfere with patients’ compliance and also may lead to life-threatening events.

The physicians should think about several precautions that should think about before prescribing any drugs especially the high risked ones in order to decrease the risk of ACDR:
1. The previous history of drug hypersensitivities in the patients should be asked to prevent a recurrence by the same category or the drugs with the same structure.
2. The other medications that the patient is using simultaneously are so important to be checked to prevent higher risk due to multi-drug therapy.
3. Any underlying disease in the end organs of metabolisms like kidney and liver should be detected to prevent drug accumulation and over dose due to impaired metabolism.
4. The high-risk patients such as children, pregnant women, and older patients have a higher risk of ACDR in the skin and should be managed cautiously.
5. The drugs that may interfere with the activity of the cytochrome P450 pathway may accelerate the drug hypersensitivity and drug cross reactions.[1,2]

Finally, the authors detected a higher prevalence of more serious and life-threatening types of ACDR like Stevens Johnson and toxic epidermal necrolysis in their study. This finding is so important and may be due to the difference in type and potency of metabolic pathways in Iranian patients due to their ethnic groups, or it may be due to not including the above mentioned risk factors by the authors in their assessment.[3]

It is recommended to pay enough attention to risk factors of increasing drug hypersensitivity reactions during prescription of any drug especially those with higher risk of ACDR.[4]

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REFERENCES