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## A case of Voriconazole induced maculopapular rash noted in a tertiary care hospital

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**Introduction:** Voriconazole is a broad-spectrum triazole antifungal agent indicated for invasive aspergillosis, refractory *Candida* infections, and other emerging invasive fungal infections. Adverse cutaneous reactions associated with voriconazole therapy occur in fewer than 10% of treated patients and range from mild erythematous eruptions to life-threatening reactions such as the Stevens-Johnson syndrome and toxic epidermal necrolysis. Photosensitivity reactions are an uncommon but characteristic dermatitis in voriconazole recipients, particularly following chronic administration.

Case details: A 13 year old, girl was diagnosed to have acute lymphoblastic leukemia (ALL) in our hospital. She was put on Aztreonam and Amikacin as an empirical treatment for febrile neutropenia. After complete evaluation, she was put on induction stage, phase A chemotherapy with Prednisolone, Vincristine, daunorubicin and L-asparginase. After 20 days of chemotherapy, it was stopped due to very low neutrophil counts (14%). One week later, voriconazole was prescribed as a prophylactic therapy along with Aztreonam and Amikacin. After 3 days of initiating voriconazole, she developed severe maculopapular rash with intense itching. So, the drug was stopped and liposomal Amphotericin-B was given instead of voriconazole. Then the rash subsided.

**Comment:** This case highlights the importance of recognizing adverse dermatologic reactions noted with voriconazole, an anti-fungal agent whose clinical use continues to expand.

## **Biography**

Gayatri Devi C is presently doing D.M. clinical pharmacology at Nizam's Institute of Medical Sciences, India, Hyderabad. She has completed her MD Pharmacology from Rangaraya Medical College, Kakinada. She has given oral presentation in south regional IPS conference in 2012 and has attended many workshops and conferences in various fields of Pharmacology

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