

Acneiform to the First Panitumumab Perfusion

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Clinical Image

A diffuse papulopustular acneiform eruption, which is noted in up to two-thirds of patients receiving any of these agents, is the most common cutaneous reaction pattern with the EGFR inhibitors. Reactions consisting of erythematous papules and pustules based on follicles, usually without comedones, are often dose-dependent and begin within a week of treatment initiation. The usual lesions the face, trunk, and extremities are present, sparing the palms and soles. The reaction to topical treatments for acne (e.g., benzoyl peroxide, retinoids, and antibiotics) is inconsistent, although certain benefits can be observed (1,2).



Figure 1: Acneiform of Skin.

This is a 50-year-old patient treated for metastatic colon cancer (wild type RAS) with a FOLFOX-based palliative regimen. +Panitumamb once every 14 days at a dose of 6 mg/Kg. After the first treatment period, she showed a diffuse papulopustular acneiform eruption in the face and the trunk.

We treated this skin toxicity with sun exposure avoidance, benzoyl peroxide doxycycline 100 mg per day and topical glycerin.

References

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