Hand foot syndrome associated with standard dose cytarabine

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A 28-year-old lady with an acute myeloid leukemia underwent induction chemotherapy consisting of daily intravenous infusion of cytarabine (100 mg/m²) for 7-days plus daunorubicin (75 mg/m²) for 3 days. On day 8 of therapy the patient’s left palm and soles became red and painful. Later, well-demarcated erythematous plaques, bullae, and desquamation developed over her hands and feet [Figure 1a and b]. Diagnosed as cytarabine-induced palmar-plantar erythrodysesthesia (hand foot syndrome, HFS, acral erythema, or Burgdorf’s reaction). She was given supportive care, topical emollient, cushioning sore skin with soft pads and pyridoxine (vitamin B6), and the acral erythema completely resolved by day 18.

Figure 1a: Erythematous plaques, bullae, and desquamation of hand

Figure 1b: Discoloration of feet

ABSTRACT

Hand-foot syndrome, is a side effect of cytotoxic chemotherapy, causes erythema, dysthesias, swelling of palms and soles and sometimes blisters. Rarely, it may ulcerate. The most commonly used drug that frequently causes this reaction is 5-fluorouracil or its prodrug oral capecitabine. High dose cytarabine is known to cause HFS. Here we report a case of HFS caused by standard dose cytarabine.

Key words: Cytarabine, hand-foot syndrome, palmar-plantar erythrodysesthesia

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