

### Favipiravir/loxoprofen/paracetamol

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#### **Symmetrical drug-related intertriginous and flexural exanthema: case report**

A 44-year-old man developed symmetrical drug-related intertriginous and flexural exanthema (SDRIFE) during treatment with loxoprofen, paracetamol and off label favipiravir for COVID-19 [*routes and dosages not stated*].

The man presented with fever. He also noted to have headache and fatigue. After investigation, he was diagnosed with COVID-19 infection. On the 17<sup>th</sup> day of symptoms, he developed erythematous macules and petechiae on his both legs. The erythematous macules suddenly appeared in the knee, flexural thigh and popliteal fossae. Laboratory examination on admission showed the following: WBCs 5300/mm<sup>3</sup>, lymphocytes 715/mm<sup>3</sup>, platelets 118000/mm<sup>3</sup> and C-reactive protein 4.95 mg/dL. About 6 days prior to the development of eruption, he had started receiving off label treatment favipiravir for COVID-19. Additionally, he also received with loxoprofen [loxoprofen sodium hydrate] and paracetamol [acetaminophen].

Subsequently, the man's treatment with loxoprofen was stopped. Despite the administration of paracetamol and favipiravir, the eruption spontaneously involuted over 4 days without a trace. Lymphocyte transformation tests showed positive reactions to favipiravir, loxoprofen and paracetamol. Based on the findings, he was diagnosed with SDRIFE secondary to favipiravir, loxoprofen and paracetamol. After 7 days, he was discharged and no long-term sequelae was noted.

Hayakawa J, et al. COVID-19-related cutaneous manifestations associated with multiple drug sensitization as shown by lymphocyte transformation test. *Journal of the European Academy of Dermatology and Venereology* 34: e779-e781, No. 12, Dec 2020. Available from: URL: <http://doi.org/10.1111/jdv.16878>

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