

Ivermectin-associated SCARs

Dermatologists should be aware of ivermectin-associated severe cutaneous adverse reactions (SCARs), say authors of a study published in the *Journal of Dermatology*.

Data from the FDA Adverse Event Reporting System (FAERS) from 2014 to 2021 were used to identify safety signals for SCARs (such as Stevens-Johnson syndrome, toxic epidermal necrosis, and DRESS syndrome) after systemic treatment with ivermectin.

During the study period, there were 517 FAERS reports of adverse events (AEs) in patients receiving systemic ivermectin which were classified as SCARs (4.8%), nonsevere cutaneous AEs (15.7%) or noncutaneous AEs (79.5%). The most frequently reported SCARs were toxic epidermal necrolysis (n=7), Stevens–Johnson syndrome (7) and DRESS syndrome (4). The most frequently reported nonsevere cutaneous AEs were pruritus (38.3%), rash (19.8%), and angioedema (13.6%).

Overall, 48% of patients with SCARs required hospitalisation and 20% of cases resulted in death.

Safety signals were identified for any SCARs (adjusted reporting odds ratio [aROR] 3.34; 95% CI 2.17, 5.12) and toxidermias (TEN, SJS, DRESS, and acute generalised exanthematous pustulosis; aROR 7.08; 95% CI 4.23, 11.84).

"This study suggests that ivermectin is associated with SCARs on rare occasions," concluded the authors. Given the increase in misuse of ivermectin as a potential COVID-19 therapy, dermatologists should be aware of this association, they commented.