

Antimalarial Drugs and Pruritus in Patients with Lupus Erythematosus

Sir,

It was with great interest that we read the paper by Holme & Holmes entitled "Hydroxychloroquine-induced pruritus", in which they presented a case of this condition in a woman with lupus erythematosus (1). However, these authors wrongly described their case as the first one to be published. Based on our experience in this area, we wish to expand the knowledge of antimalarial drug-induced pruritus in some patients with lupus erythematosus.

Two years ago we published a paper describing a series of 136 patients with lupus erythematosus. Of these, 104 were given antimalarial drugs treatment and 6 (5.77%) developed probable or definitive pruritus relating to the antimalarial drugs (2), according to Karch-Lasagna criteria (3). These 6 patients had an aquagenic or post-wetness type of pruritus, usually located in the lower extremities and back, without visible skin changes. It appeared $\approx 1-3$ weeks after initiation of antimalarial drugs therapy and developed mainly after a hot shower, beginning within minutes of water contact, persisting at a high intensity for approximately 10 min and then remaining at a low intensity for several hours. Also, we found that pruritus was slightly more intense with

chloroquine than with hydroxychloroquine and that it was apparently not related to lupus activity (4).

REFERENCES

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