

Table SI. Cases of drug-induced lymphocytic infiltrations of Jessner-Kanof previously reported in the literature

References	Drugs involved and its function	Patients		Laboratory investigations and patch test	Diagnosis
		<i>n</i> (years)	Clinical features		
Schepis C, et al. 2004 (12)	ACE-inhibitor (enalapril) Hypotensive drug	1 (40)	Erythematous arciform plaques located in the thoracomammary region	Not reported Patch test: negative	Drug-induced eruption resembling LIJK and LE tumidus
Nolden S, et al. 2005 (14)	Hydroquinone containing cream Bleaching cream	1 (27)	Circumscribed, erythematous, tumid, palpable plaques on the face and forearm	Negative Patch test: positive	Delayed-type hypersensitivity of the skin affecting only the dermis with clinical, histological and immunoistochemical findings typical for LIJK
Caroli UM, et al. 2006 (15)	Glatiramer acetate (GLAT) Immunomodulatory drug for multiple sclerosis	1 (40)	Figured erythema with lichenoid and urticarial papules in symmetrical distribution on the ventrolateral femoral skin of both legs	Not reported Patch test: not performed	T-cell pseudolymphoma linking the GLAT injections with the lymphocytic infiltration of the skin
Sparsa L, et al. 2011 (13)	Leflunomide Immunomodulatory drug for rheumatoid arthritis	1 (56)	Maculopapular cutaneous eruption associated with anular lesions of the face, thorax and limbs	Positivity for RF, CRP, ANA, anti-Ro/SSA Ab. Patch test: not performed	Cutaneous lupus histologically comparable to LIJK

ANA: anti-nuclear antibody, CRP: C reactive protein, RF: rheumatoid factor.