

Subacute cutaneous lupus erythematosus due to proton pump inhibitor intake: case report and literature review

A. Reich, M. Kaniowski, J. Maj

Department of Dermatology, Venereology and Allergology, Wrocław Medical University, Poland

There are a few reports documenting drug induced lupus erythematosus due to intake of proton pump inhibitors. Here, we present a 57-year-old woman, who was admitted to our department with a 2-month history of extensive annular erythemas on the entire body. Three months before skin lesion appearance the patient initiated a therapy with lansoprazole due to chronic duodenitis diagnosed on endoscopy. On admission the patient demonstrated confluent annular erythemas located mainly on the trunk, but also involving face, both extremities and V-neck area. Laboratory examination revealed circulating antinuclear antibodies (Ro antibodies with a titer of 1:640), slight leukopaenia (3.840), erythrocyturia and leukocyturia, decreased complement level (C3=0.816 g/l) and slightly elevated activity of aminotransferases in the serum. The UVB phototesting was negative. The direct immunofluorescence of the lesional sun-exposed and non-lesional non-sun-exposed skin showed granular IgM deposits at the dermo-epidermal junction. The histology showed features of interface dermatitis with vacuolar degeneration of the basal layer of the epidermis and lymphocytic perivascular infiltrate in the dermis. Based on the clinical presentation and anamnesis, subacute cutaneous lupus erythematosus (SCLE) was diagnosed, probably due to lansoprazole intake. The drug was discontinued and the patient received prednisone 0.5 mg/kg/day and ranitidine 150 mg bid. A complete clearance of skin lesions was noted within 4 weeks of the treatment. In our opinion, a rapid improvement of SCLE after discontinuation of lansoprazole strongly favours the hypothesis of causal relationships. Beside our patient, only 9 patients with lupus erythematosus induced by proton pump inhibitors were described until now in the literature. However, we suppose that the prevalence of lupus erythematosus induced by proton pump inhibitors could be much higher, as most physicians are not aware about this complication.