



Chemotherapy Induced Palmoplantar Hyperpigmentation

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Image Article

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Introduction

A 60-year-old man, with unresectable adenocarcinoma of the oesophagus with feeding gastrostomy insitu was admitted in our hospital with left sided pyothorax. He was managed with intercostal tube drainage and intravenous antibiotics. Physical examination showed hyperpigmentation of palms and soles (shown in the Figure 1a and 1b below). However, he did not complain of redness, swelling, ulceration, pain, or dysesthesia over the discoloured areas. One month back he completed Capecitabine based chemotherapy along with radiotherapy for oesophageal carcinoma. His routine blood investigations were normal except for elevated total leukocyte count. So, it was concluded that it was a side effect of Capecitabine.



Figure 1b: Hyperpigmentation of soles.



Figure 1a: Hyperpigmentation of palms.

Discussion

Chemotherapy has many systemic side effects, some of them warrant discontinuation of the offending agent and some others require change of chemotherapy regimen. Capecitabine is a prodrug of 5-Fluorouracil used in chemotherapy regimens usually for the treatment of gastrointestinal malignancies [1]. Hand foot syndrome (HFS) occurs in 50% of patients taking Capecitabine some postulates that this may be due to mitochondrial dysfunction in keratinocytes causing this syndrome [2]. Hyperpigmentation of palms and soles also occur in patients taking this drug, some authors consider it as an early phase of HFS [3] and others argue that it is entirely a different phenomenon due to excretion of its metabolites through eccrine glands present numerously in palms and soles [4]. In our patient as he does not have any pain we continued the chemotherapy regimen after resolution of pyothorax.

References

1. Malet-Martino M, Martino R (2002) Clinical studies of three oral prodrugs of 5-fluorouracil (capecitabine, UFT, S-1). A review *Oncologist* 7(4): 288-323.
2. Chen M, Chen J, Peng X, Xu Z, Shao J, et al. (2017) The contribution of keratinocytes in capecitabine-stimulated hand-foot-syndrome. *Environmental toxicology and pharmacology* 49: 81-88.
3. Caprez J, Rahim U, Ansari A, Lodhi MU, Rahim M (2018) Hyperpigmentation with Capecitabine: Part of Hand-Foot Syndrome or a Separate Entity?. *Cureus* 10(3): e2397.
4. Sanghi S, Grewal RS, Vasudevan B, Nagure A (2013) Capecitabine induced hand-foot syndrome: report of two cases. *Med J Armed Forces India* 69(1): 65-67.

