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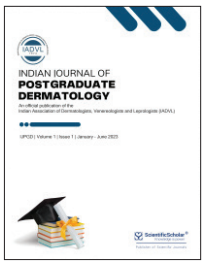

Letter to Editor

TAXANE-Induced Cutaneous Manifestations

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Quick Response Code:

Dear Editor,

A 30-year-old female came to our clinic presenting with asymptomatic linear hyperpigmentation on her left forearm, which developed following a peripheral intravenous injection. She had been diagnosed with the right breast carcinoma, confirmed as Her2nu positive and underwent a modified radical mastectomy. Subsequently, she received chemotherapy that included docetaxel, carboplatin and trastuzumab, with docetaxel administered through intravenous infusion over five cycles. Approximately 4 weeks after her first dose of docetaxel, she observed pigmentation at the injection site on her left forearm.

On clinical examination, linear streaks of hyperpigmentation were noted over the flexor side of her left forearm [Figure 1]. The veins beneath these pigmented streaks were neither tender nor thickened.

Figure 1: Linear streaks of hyperpigmentation along the course of veins over the flexor aspect of the left forearm.

Figure 2: (a) Diffuse hyperpigmentation of the palms with scaling and increased pigmentation of the creases. (b) All the fingernails show bands of pigmentation.

In addition, examination of her palms revealed ill-defined hyperpigmentation, scaling and increased pigmentation in the skin creases [Figure 2a]. All her fingernails exhibited bands of pigmentation [Figure 2b]. Chemotherapeutic agents are increasingly utilised in the treatment of breast cancer, yet dermatological side effects are often under-reported. Among the drugs known to cause cutaneous adverse effects, taxanes (such as Docetaxel and Paclitaxel) are the most commonly implicated.[1] Serpentine supra-venous hyperpigmentation is a rarely documented dermatological side effect associated with the combination of docetaxel and carboplatin.

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