PARASTOMAL RASH WITH CETUXIMAB IN METASTATIC RECTAL CANCER

Katerina Jou, B.S.[1,2] and Indraneil Mukherjee M.D.[2]
[1]City University of New York (CUNY) School of Medicine, New York, NY
[2]Staten Island University Hospital – Northwell Health, Staten Island, NY

INTRODUCTION

- Epidermal growth factor receptor inhibitors, such as cetuximab, have been used to treat lung, colorectal, and head and neck cancers
- Skin eruptions are a common adverse effect, appearing around 1-3 weeks after chemotherapy initiation in 50-100% of patients, with an increased severity in 5-10%, and can be prophylactically treated with tetracyclines
- Cetuximab-induced eruptions have been found to be more common in males and younger patients
- However, it is more uncommon for patients to experience rashes and acneiform eruptions after prolonged chemotherapy treatment, and incidence rates for such presentations have not been documented

OBJECTIVE

We report a patient who developed a parastomal rash in the setting of metastatic rectal cancer while taking cetuximab

CASE PRESENTATION

- 62M with PMH of stage IV rectal adenocarcinoma with liver and lung metastasis on FOLFIRI and cetuximab, hypertension, and right inguinal scrotal hernia s/p laparoscopic low anterior resection with end colostomy for rectal perforation presenting with skin irritation under the colostomy bag
- Recent history of diffuse acneiform rash over his chest that was suspected to be secondary to cetuximab and had self-resolved over the course of a month before LAR
- Several months after his resolved rash, the patient is now presenting with a rectangular erythematous patch with satellite lesions, skin maceration in the shape of the tape of the colostomy bag

IMAGING

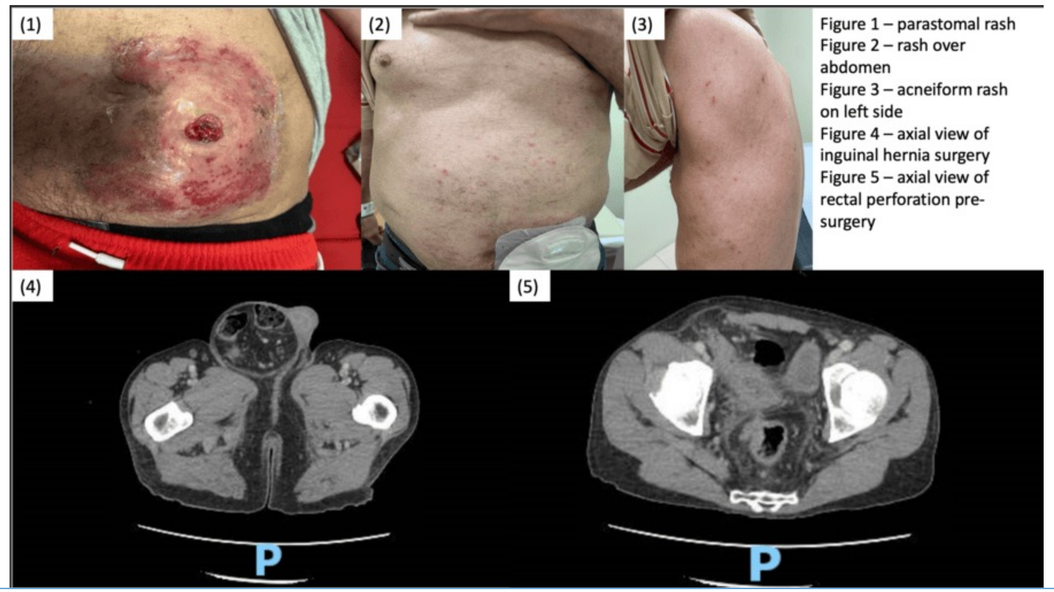


Figure 1 – parastomal rash
Figure 2 – rash over abdomen
Figure 3 – acneiform rash on left side
Figure 4 – axial view of inguinal hernia surgery
Figure 5 – axial view of rectal perforation pre-surgery

RESULTS

- Patient's chemotherapy regimen was held and was started on a combination of amoxicillin/clavulanate before seeing a dermatologist and his oncologist
- Improved cutaneous symptoms with clindamycin lotion, hydrocortisone 2.5% cream, and ketoconazole cream

CONCLUSION

- Differentials for skin eruptions on chemotherapy with routine colostomy bag use include folliculitis, seborrheic dermatitis, and contact dermatitis
- Mechanisms for rash manifestation and skin toxicity with cetuximab may involve hormonal interactions between the EGFR and androgens/estrogens, but pathogenesis generally remains unclear
- Despite the increased likelihood of those diagnoses for the general population, it is also important to evaluate the role of cetuximab in skin manifestations, as this presentation is associated with bacterial cellulitis and septicemia in immunocompromised patients like ours