

Symmetrical Drug-Related Intertriginous and Flexural Exanthema After Coronary Artery Angiography

Sara Thierman, MD¹

R. Sharon Chinthraja, MD²

¹ Department of Internal Medicine, California Pacific Medical Center, San Francisco, California

² Department of Medicine, California Pacific Medical Center, San Francisco, California

A 57-year-old woman developed a pruritic rash 6 hours after undergoing coronary angiography. On exam, symmetrical, eczematous plaques were noted in her bilateral groin (Figure 1), buttocks, axillae (Figure 2), and the intertriginous folds of her breasts. No palmar, plantar, or mucosal lesions were noted and laboratory tests were normal. This patient presents with symmetrical drug-related intertriginous and flexural exanthema (SDRIFE) secondary to iodine-based contrast dye. It is a type IV hypersensitivity reaction most often reported to nickel, mercury, and systemic antibiotics, although previous sensitization is often unknown. Also called baboon syndrome because

its distribution mimics the pink bottom of a baboon, SDRIFE appears hours to days after exposure to the offending agent. The unusual distribution may be explained by high concentrations of the allergen in sweat. Resolution is typical with discontinuation of the offending drug, although antihistamines, topical steroids, and possibly oral steroids may be useful adjuncts.

Address for correspondence and reprint requests: Dr. Sara Thierman, California Pacific Medical Center, Internal Medicine, 2333 Buchanan, San Francisco, CA 94115; Telephone: 415-596-9844; Fax: 702-442-9932; E-mail: sarathierman@gmail.com; schinths@gmail.com

Received 31 March 2008; revision received 21 July 2008; accepted 31 July 2008.



FIGURE 1. View of right groin of patient with baboon syndrome.



FIGURE 2. Right axilla of patient with baboon syndrome.