

ACOS23P-003: Severe Case of Erythroderma with Hypoalbuminemia in a 61-Year-Old Indonesian Female Caused by Drug Hypersensitivity

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Erythroderma, also known as exfoliative dermatitis, is a skin condition characterized by widespread erythema and scaling affecting over 90 percent of the body's surface area. This condition accounts for approximately 1% of hospital admissions in Indonesia and globally. It tends to affect men and the elderly more and is associated with a significant risk of mortality. Despite adequate therapy using corticosteroids, mortality rates remain high. Drug hypersensitivity is a significant cause of erythroderma. Herein, we present a severe case of erythroderma involving a 61-year-old female patient who presented to the emergency department of PKU Muhammadiyah General Hospital, Tegal, with sudden generalized redness and itching persisting for two days before admission, accompanied by the development of scaly skin over the last 12 hours before admission. The patient, a shopkeeper by occupation, reported a recent fever and ingestion of ibuprofen two days prior. However, there was no history of atopy, chronic skin disease, liver disease, or alcoholism. Upon examination, the patient displayed widespread erythema covering the entire body with varying degrees of scaling. The patient also exhibited hair loss and significant edema in all extremities. Laboratory analysis revealed significant hypoalbuminemia. A diagnosis of erythroderma with complication of hypoalbuminemia was established. The patient received management that included intravenous methylprednisolone injections, oral chlorpheniramine maleate, oral albumin supplementation, and topical application of clobetasol propionate 0.5% ointment and oleum olivarium. After three days of hospitalization, the patient's red scales and itching gradually subsided, and laboratory results showed an improvement in albumin levels. Upon improvement, the patient was discharged. In this case, erythroderma resulted from an unexpected drug hypersensitivity reaction. Hypoalbuminemia may be attributed to continuous skin exfoliation. Supportive therapy involving oral albumin, antihistamines, topical steroids, and oleum olivarium demonstrated efficacy in improving the patient's condition. A favorable prognosis for erythroderma is expected if the underlying disease can be effectively managed.

Keywords: Erythroderma, Dermatitis, Hypoalbuminemia, Hypersensitivity.