

Answer: A. Acral erythema

Discussion

Acral erythema, or hand-foot syndrome, is a transient adverse skin reaction sometimes seen in patients receiving chemotherapy. It can develop from days to months after treatment, and characteristically affects palmar aspects of hands and feet, particularly fingertips and toes. Patients first experience tingling pain, then erythema and swelling; some of them go through desquamation before lesions heal. Drugs implicated include doxorubicin, which this patient received, cytarabine, 5-fluorouracil and its derivative capecitabine[1]. The pathogenesis is unclear, but may involve local drug toxicity to proliferating basal cells. No effective preventive measures exist except avoiding aggravating agents. Treatment options are limited; besides ice packs and analgesia, high dose pyridoxine and oral corticosteroids are suggested but with limited evidence[2]. The patient received cool compresses, emollients and high dose pyridoxine (300mg/day) with gradual resolution of symptoms over 1 week. Her oncologist later switched her to a different regimen.

Figure legends

Figure 1: Well-defined erythema is seen on fingers (A) and toes (B).

References

1. Guillot, B., D. Bessis, and O. Dereure, *Mucocutaneous side effects of antineoplastic chemotherapy*. *Expert Opin Drug Saf*, 2004. **3**(6): p. 579-87.
2. Kang, Y.K., et al., *Pyridoxine is not effective to prevent hand-foot syndrome associated with capecitabine therapy: results of a randomized, double-blind, placebo-controlled study*. *J Clin Oncol*, 2010. **28**(24): p. 3824-9.