

Images in Clinical Oncology

RED MAN SYNDROME



Fig 1 : Clinical Photograph Showing diffuse red colored rash over back



Fig 2 : Lesions over anterior abdomen

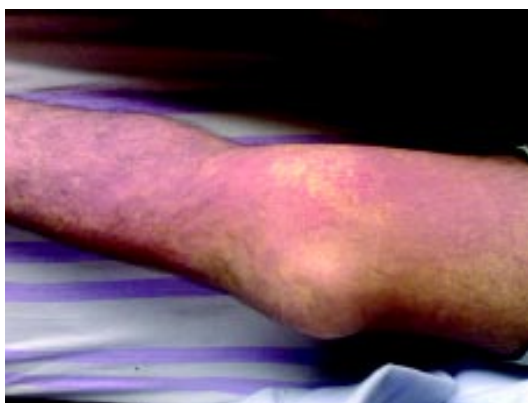


Fig 3 : Lesions over lower Limb.

ZR, 21-year-old male patient was diagnosed to have AML-M2. He developed fever while on induction chemotherapy with daunomycin and cytosine Arabinoside. Vancomycin was started. He developed diffuse red colored rashes (redman syndrome) over back (Fig 1), anterior abdomen (Fig 2) and lower limbs (Fig 3). Teicoplanin was substituted for Vancomycin.

Red man syndrome has often been associated with rapid infusion of the first dose of Vancomycin. It may manifest as a shock like picture with tachycardia, hypotension, shortness of breath together with a diffuse red coloured rash. It was initially attributed to impurities found in vancomycin preparations but even after improvement in vancomycin's purity, reports of the syndrome persisted. It has been attributed to histamine release. Rarely, it has been reported with teicoplanin, ciprofloxacin and amphotericin as well. Discontinuation of the vancomycin infusion and administration of diphenhydramine may abort most of the reactions. Slow intravenous administration of vancomycin should minimize the risk of infusion-related adverse effects.

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