

A case of SDRIFE induced by Nuvaring®

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Nuvaring® (Schering-Plough, Kenilworth, NJ, USA) is a contraceptive intravaginal ring that releases etonorgestrel and ethinylloestradiol into the systemic circulation.

Symmetrical drug-related intertriginous and flexural exanthema (SDRIFE), better known as baboon syndrome, is an uncommon reaction resulting from systemic exposure to a drug. It presents as a dark red, itching and well-defined symmetrical eruption, located on the buttocks, groins, and/or thighs or other flexural folds. Patients suffering from this reaction are usually healthy and do not present with systemic symptoms (1).

Case Report

An atopic and otherwise healthy 33-year-old woman presented with a very itchy eruption, symmetrically located on the large body folds (buttocks, groins, and armpits) (Fig. 1). The patient had used Nuvaring®



Fig. 1. Clinical aspect with an eruption symmetrically located on the large body folds.

for 7 days. Previous contraceptive oral treatment with Cerazette® (Schering-Plough), which contains desogestrel, another progestative, had been well tolerated. The patient had immediately removed the Nuvaring® and was treated with a reducing course of oral corticosteroids (Medrol®, methylprednisolone, Pfizer, New York, USA).

Patch tests were later performed with the European baseline series, rubber, glue and plastic series, fragrance

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mixes I and II series, and dye and textile finishing series (Chemotechnique, Vellinge, Sweden; Trolab, Almirall Hermal, Reinbek, Germany), as well as Nuvaring[®], Implanon[®] (Schering-Plough), and Cerazette[®], the last of these being tested pure and diluted 30% and 10% in petrol. The patch test materials used were van der Bend chambers (van der Bend, Brielle, The Netherlands), covered on the upper back with Mefix[®] (Mölnlycke Health Care, Mölnlycke, Sweden). The patch tests, read at D2 and D4, were positive for colophonium (+), *Myroxylon pereirae* (+), abitol (++), fragrance mix I (++), and Nuvaring[®] (+). Patch tests with the ring vehicle (vinyl acetate copolymer), as well as with Cerazette[®], remained negative. Implanon[®], another contraceptive agent containing etonorgestrel but without ethinyloestradiol, and

with the same vinyl acetate copolymer vehicle, also gave positive results, confirming sensitization to the synthetic progestative. Thirty control subjects tested negatively for these two contraceptive devices.

Discussion and Conclusion

This is the first case of SDRIFE caused by etonorgestrel contained in a contraceptive intravaginal ring. The eruption occurred in our patient without known prior sensitizing exposure. Cross-reactions between etonorgestrel and other progestatives are not described in the literature, as confirmed in this case, with tolerance to a contraceptive oral treatment containing desogestrel.

Reference

- 1 Häusermann P, Bircher A J. SDRIFE – another acronym for a distinct cutaneous drug exanthema: do we really need it? *Dermatology* 2007; **214**: 1–2.