

Thioridazine photosensitivity

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Phenothiazines are a well-known group of photo-sensitizing drugs (Almeyda 1971, Epstein 1968). Most of the reported cases of phenothiazine light reactions have been caused by chlorpromazine (Anderson & Sanchez-Longo 1961). In Finland, many psychiatrists prefer thioridazine in summer-time because it is safe in this respect. Only a few authors have described photosensitization to thioridazine (Barsa & Saunders 1960, von Kirchgraber 1963). These reactions have apparently been phototoxic due to ingestion of large doses of this drug (Satanove & McIntosh 1967).

In 1961, a 58-year-old woman developed acute eczema for the first time on all light-exposed areas of her body. Just before the eruption she had taken both chlorpromazine and thioridazine for only two weeks, but the exact data are unfortunately lacking. However, after she had discontinued all the medication, the rash disappeared within a few weeks.

The patient was in good condition both mentally and dermatologically until July 1975, when she was told to take thioridazine 200 mg daily because of an acute paranoid reaction. After one day of therapy, a severe rash again appeared on all light-exposed areas of her body. The symptoms are gradually disappearing. Her medical history did not reveal any other drug which might have caused the rash.

On clinical examinations in July and October 1975, long UV rays (15 mJ/cm²) produced an acute edematous eczema. A photoepicutaneous test with thioridazine (1% in pet.) using Finn Chambers (Suhonen et al. 1975) was strongly positive with a UVA dose of 7 mJ/cm². A photointradermal test with thioridazine 0.01% was also positive. Tests with chlorpromazine (1% in pet.) and promethazine (1% in water) gave similar long-lasting allergic type reactions.

In ten healthy controls subjects an erythematous irritant type reaction with thioridazine was elicited by a ten-fold UVA dose, but not by lower doses of UVA.

It seems that a true photoallergy to thioridazine had developed during the previous episode more than ten years before. Whether the allergy ensued from thioridazine itself or from cross-hypersensitivity with chlorpromazine could not be resolved.

References

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