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**Short Communication**

# Allergic contact dermatitis due to trimebutine

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## Case Report

A 40-year-old man presented with a pruritic perianal eruption characterized by erythema, papules, vesicles and exudation. He had been applying Proctolog® cream to hemorrhoids for 5 days. Proctolog® cream was stopped and the patient successfully treated with topical corticosteroid.

Patch tests were performed on the upper back with the standard series of the Spanish Contact Dermatitis Group and Proctolog® cream. Standard patch tests were all negative, but the patch test with Proctolog® cream was +++ at D2 and D4. Proctolog® cream contains trimebutine, ruscogenin and excipients. We patch tested with trimebutine powder contained in Polibutin® suspension, in water at 4.8, 2.4, 1.2, 0.6, 0.3 and 0.15 mg/ml. All concentrations of trimebutine were +++ at D2 and D4. Later, patch testing with trimebutine in cream-gel at concentrations of 2%, 1%, 0.5% and 0.1%, and the excipients of the cream-gel, was done. All such tests were positive at D2 and D4, except for the excipients. 20 controls were entirely negative.

## Discussion

Trimebutine [2-dimethylamino-2-phenylbutyl 3,4,5-trimethoxybenzoic acid], synthesized by Jouvenail Laboratories 25 years ago, is an antispasmodic used orally to treat functional bowel disorders (1–4), and rectally and topically for anal fissures and hemorrhoids (5–7).

The 1st adverse effects from topical application were reported by Maffioli et al. in 1975 (8) and Chebanon in 1976 (9), both reports being of erythema and/or burning. To our knowledge, allergic contact dermatitis from trimebutine has not previously been reported.

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