

LETTER TO THE EDITOR

Grading of Severe Follicular Rash in Patients Receiving EGFR Inhibitors

TO THE EDITORS:

A significant limiting issue in the use of biologic agents targeting epidermal growth factor receptor (EGFR) is dermatological toxicity, mainly papulopustular eruption of the skin, reported in 60–80% of patients.¹ The possible mechanism of EGFR-inhibitor-related cutaneous toxicity is inhibition of EGFR in the skin itself.^{2,3} Many studies have shown significant correlation between severity of skin toxicity and tumor response.⁴ In the Dermo-Oncologic Unit of Brescia, Italy, we try to estimate the amount of the body involved by dermatitis in patients treated with cetuximab by using a reproducible method that can be easily exploited by specialists with different areas of expertise. A simple system to grade dermatitis in order to recognize the most severe cases as soon as possible among patients receiving EGFR inhibitors is presented. Severe dermatitis was assessed using a grading that we carried out on the basis of:

- (1) Type of lesion, which we classified as: erythematous papules, pustules, and plaques covered by abounding scales.
- (2) Extension of dermatitis by using “the rule of nines,” which considers: head = 9% (front and back), chest = 18%, back = 18%, right arm = 9%, left arm = 9%, perineum = 1%, right leg = 18%, left leg = 18%.

Since the body areas more often involved by follicular dermatitis reaction are the head, chest, and back, we classify the reaction as severe when the dermatitis involves more than 45% of the body and the type of lesion is papules, pustules, and plaques often covered by scales. It is important for dermatologists and oncologists to recognize this severe reaction and classify it in a uniform way in

order to treat it properly. We believe that recognizing severe follicular rash may be useful to control signs and symptoms of skin toxicity in order to prevent therapy interruption, and also that it might be useful to understand treatment efficacy and mostly to improve patient quality of life.

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