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Oral ketoconazole induced cheilitis: A rare adverse effect

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Introduction & Objectives: Ketoconazole, an imidazole antifungal, is now used as a second line drug for fungal infections. It was developed as a first line agent for dermatophytosis, but was soon found to have various side effects, such as hepatotoxicity, leading to it being replaced by safer and effective drugs like terbinafine and itraconazole.

Materials & Methods: A 37 year-old-female presented to dermatology OPD with the complaints of itching, redness and scaling over groins and medial aspect of thigh since 3 months. It was diagnosed as dermatophytosis infection clinically, as well as on microscopic examination using potassium hydroxide 10%. After normal biochemical tests, she was started on capsule itraconazole 100 mg twice a day. However, after 3 weeks of treatment, she developed newer lesions while on treatment. She was started on ketoconazole 200 mg twice a day after which she noticed improvement in lesions. However, she reported increased facial dryness after a week. After further treatment of two weeks, she developed marked facial erythema, as well as cheilitis.

Results: Oral ketoconazole was stopped and treatment in the form of desonide 0.05% and petroleum jelly was given to be applied. She noticed marked improvement in cheilitis within a week. Her dermatophytosis condition was managed with oral terbinafine and topical ciclopirox cream with significant improvement.

Conclusion: Oral ketoconazole can be added to the list of causes of drug-induced cheilitis is, a hitherto unreported cause. Oral ketoconazole, though has varied other side-effects, such as hepatotoxicity and anti-androgenic side effects like gynaecomastia, cheilitis has never been reported with the use of this drug. Hence, it begins imperative to screen for cheilitis, along with other side effects, while using this drug.