

## Image

# Giant fixed drug eruption

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A 29-year-old male presented with a solitary, well-circumscribed, oval-shaped, dark-violaceous pruritic giant patch with an erythematous border measuring 26 × 14 cm in size on the right lateral side of his abdomen. There were vesiculation and distinct spared areas against a background of dusky, violaceous erythema at the center of the lesion [Figure 1]. He developed the eruption within 2 h after taking a single dose of cotrimoxazole. Based on typical clinical morphology,<sup>[1]</sup> a diagnosis of fixed drug eruption (FDE) was made. The patient was subjected to an oral provocation test, and after giving one-fourth tablet of cotrimoxazole, reactivation of the healed lesion was observed within 2 h. Fluoroquinolones, sulfonamides, tetracyclines, and non-steroidal anti-inflammatory drugs are common causes of FDEs. In a study, the ofloxacin-ornidazole fixed

drug combination was responsible for the greatest number of cases of FDE.<sup>[2]</sup> Although FDEs are very common, such giant patches are rare.

### Ethical Approval

The Institutional Review Board approval is not required.

### Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent.

### Financial support and sponsorship

Nil.

### Conflicts of interest

There are no conflicts of interest.

### Use of artificial intelligence (AI)-assisted technology for manuscript preparation

The authors confirm that there was no use of artificial intelligence (AI)-assisted technology for assisting in the writing or editing of the manuscript and no images were manipulated using AI.

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**Figure 1:** Giant patch of fixed drug eruption.

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