

SIDE EFFECTS OF LACTULOSE SYRUP: CAN IT CAUSE BLISTERS IN THE ANUS AND GENITALS?

Oleh

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Article History:	Abstract: Lactulose syrup is commonly used to treat
Received: 23-07-2024	constipation by increasing osmotic pressure in the
Revised: 12-08-2024	intestines, which leads to softer stools. However, it may
Accepted: 27-08-2024	cause side effects, such as a fixed drug eruption—a type of
	skin reaction that can become chronic if unrecognized. This
	report presents the case of a 42-year-old male patient who
Keywords:	developed blisters in the anal and genital areas after taking
Lactulose Syrup Side Effects;	lactulose syrup for constipation. Despite self-treatment
Fixed Drug Eruption; Blisters	with gentamicin ointment, the blisters persisted. The
in Anal; Genital Areas	mechanism behind fixed drug eruptions is not fully
	understood but may involve an immune response triggered
	by drug exposure. This case highlights the potential for
	unexpected adverse reactions to lactulose syrup,
	underscoring the need for awareness and careful
	consideration of patient history in treatment.

INTRODUCTION

Lactulose syrup is a well-known osmotic laxative commonly used for the treatment of constipation [1]. It functions by breaking down in the intestines into low-molecular-weight organic acids such as lactic acid and acetic acid, which subsequently increase the osmotic pressure in the gut [1,2]. This action draws water into the bowel, softening the stool and facilitating easier passage [2]. Beyond its use in treating constipation, lactulose is sometimes prescribed to manage hepatic encephalopathy by reducing blood ammonia levels [3]. However, like all medications, lactulose is not without its potential side effects [2,4]. One notable adverse reaction is the development of a fixed drug eruption (FDE), a type of druginduced skin reaction. FDEs are characterized by the recurrent appearance of lesions at the same site each time the offending drug is taken[5]. This condition is considered one of the most common forms of drug eruptions and can lead to chronic cosmetic issues if not properly managed [5]. Unfortunately, fixed drug eruptions are often underreported due to their mild symptoms, which can easily be overlooked or misattributed to other causes. This lack of awareness among both patients and healthcare providers can result in prolonged exposure to the offending drug, potentially worsening the condition. Proper identification and management of FDEs are crucial to preventing chronic complications and improving patient outcomes.

Case

A 42-year-old male patient came with complaints of difficulty defecating for 2 days.

Journal of Innovation Research and Knowledge

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Accompanied by complaints of dizziness, nausea, and vomiting. From the results of a physical examination of the abdomen it was found to be soft, positive bowel sounds had decreased and there was no pressure pain. The patient received domperidone 3 times a day, omeprazole 2 times a day, mefenamic acid 2 times a day, vitamin B complex once a day, and lactulose syrup 3 times a tablespoon. Then after drinking lactulose syrup in the evening the patient experienced blisters in the anus and genitals. The patient bought his own ointment, namely gentamicin, but the blister marks had not dried up.

DISCUSSION

Lactulose works by increasing the osmotic pressure in the lumen of the digestive tract, so that fluid levels in the intestine increase and the feces become softer, lactulose also increases peristalsis [1,6]. In the colon, bacteria will break down lactulose into lactic acid and acetic acid so that the acid in the colon increases [7,8]. This more acidic condition of the colon will cause the diffusion of ammonia (NH3) from the blood to the intestines and convert it into ammonia ions (NH4⁺) [7,8,9]. Lactulose causes ammonia ions to remain in the colon and not be absorbed or returned to the blood [7.8]. In the case of fixed drug eruption, the exact mechanism is still unknown. Recent research suggests the existence of a cell-mediated process that triggers both active and inactive lesions. This process may involve an antibody-dependent, cell-mediated cytotoxic response [7,8]. CD8 effector/memory T cells play an important role in the reactivation of lesions due to exposure to triggering drugs [9]. This disturbing drug is thought to function as a hapten that binds more to basal keratinocytes, thereby causing an inflammatory response in certain predilections, including the genitals or rectum. Acetic acid is a substance involved in drug eruptions that is formed due to the breakdown of lactulose by colon bacteria [10].

CONCLUSION

The use of the drug lactulose syrup can result in unexpected side effects namely fixed drug eruption. Which can occur with certain predilections, namely blistering on the anus and genitals, but it is not possible for this to happen due to the use of other drugs and the history of certain diseases suffered by the patient which is not yet known.

REFERENCE

- [1] Milosavljevic T, Popovic DD, Mijac DD, Milovanovic T, Krstic S, Krstic MN. Chronic constipation: gastroenterohepatologist's approach. Digestive Diseases. 2022 Feb 28;40(2):175-80.
- [2] Aït-Aissa A, Aïder M. Lactulose: production and use in functional food, medical and pharmaceutical applications. Practical and critical review. International journal of food science & technology. 2014 May;49(5):1245-53.
- [3] Sharma S, Chauhan A. Use of lactulose in hepatic encephalopathy: is it time to shift targets?. Clinical Gastroenterology and Hepatology. 2022 May 1;20(5):e1220-1.
- [4] Moon AM, Kim HP, Jiang Y, Lupu G, Bissram JS, Barritt IV AS, Tapper EB. Systematic review and meta-analysis on the effects of lactulose and rifaximin on patient-reported outcomes in hepatic encephalopathy. Official journal of the American College of Gastroenterology ACG. 2023 Feb 1;118(2):284-93.

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- [5] Anderson HJ, Lee JB. A review of fixed drug eruption with a special focus on generalized bullous fixed drug eruption. Medicina. 2021 Sep 1;57(9):925.
- [6] Karakan T, Tuohy KM, Janssen-van Solingen G. Low-dose lactulose as a prebiotic for improved gut health and enhanced mineral absorption. Frontiers in Nutrition. 2021 Jul 27;8:672925.
- [7] Salminen S, Salminen E. Lactulose, lactic acid bacteria, intestinal microecology and mucosal protection. Scandinavian Journal of gastroenterology. 1997 Jan 1;32(sup222):45-8
- [8] Panesar PS, Kumari S. Lactulose: production, purification and potential applications. Biotechnology advances. 2011 Nov 1;29(6):940-8.
- [9] Gebhardt T, Mackay LK. Local immunity by tissue-resident CD8+ memory T cells. Frontiers in immunology. 2012 Nov 9;3:340.
- [10] Hudson M, Schuchmann M. Long-term management of hepatic encephalopathy with lactulose and/or rifaximin: a review of the evidence. European journal of gastroenterology & hepatology. 2019 Apr 1;31(4):434-50.



HALAMAN INI SENGAJA DIKOSONGKAN

Journal of Innovation Research and Knowledge ISSN 2798-3471 (Cetak) ISSN 2798-3641 (Online)