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Erythema multiforme patient handout spanish

Algorithm of Karch and Lasagna modified				
	Previous knowledge	Withdrawal effect	Rechallenge effect	Alternative 4
ment's				
g/day	Occasional	Irreversible	No	No
	Occasional	Improvement	No	No
	Occasional	Improvement	No	No
	Known	Drug not withdrawn, AR	No	Yes, more like
	Known	Drug not withdrawn, AR improved	No	Yes, more like
	Occasional	Improvement	No	No
	Occasional	Improvement	No	Yes, less/equal
	Occasional	Improvement	No	No
	Occasional	Improvement	No	No
	Occasional	Improvement	No	Yes, less/equal
	Known	Improvement	No	Yes, less/equal
	Known	Improvement	No	Yes, less/equal
	Occasional	Improvement	No	No
	Occasional	Improvement	No	Yes, less/equal
	Unknown	Improvement	No	Yes, less/equal
	Known	Improvement	No	Yes, less/equal
	Occasional	Improvement	Yes, positive	No
	Occasional	Improvement	No	No
	Occasional	Improvement	No	No
	Known	Drug not withdrawn, AR improved	No	Yes, more like
	Occasional	Improvement	No	No
	Occasional	Improvement	No	No
	Occasional	Improvement	No	No
	Occasional	Improvement	No	Without inform
	Occasional	Improvement	No	No
	Occasional	Improvement	No	No
	Occasional	Improvement	Yes, positive	Yes, less/equal
	Unknown	Improvement	No	Yes, less/equal
50mg 1 day				
liposoluble				

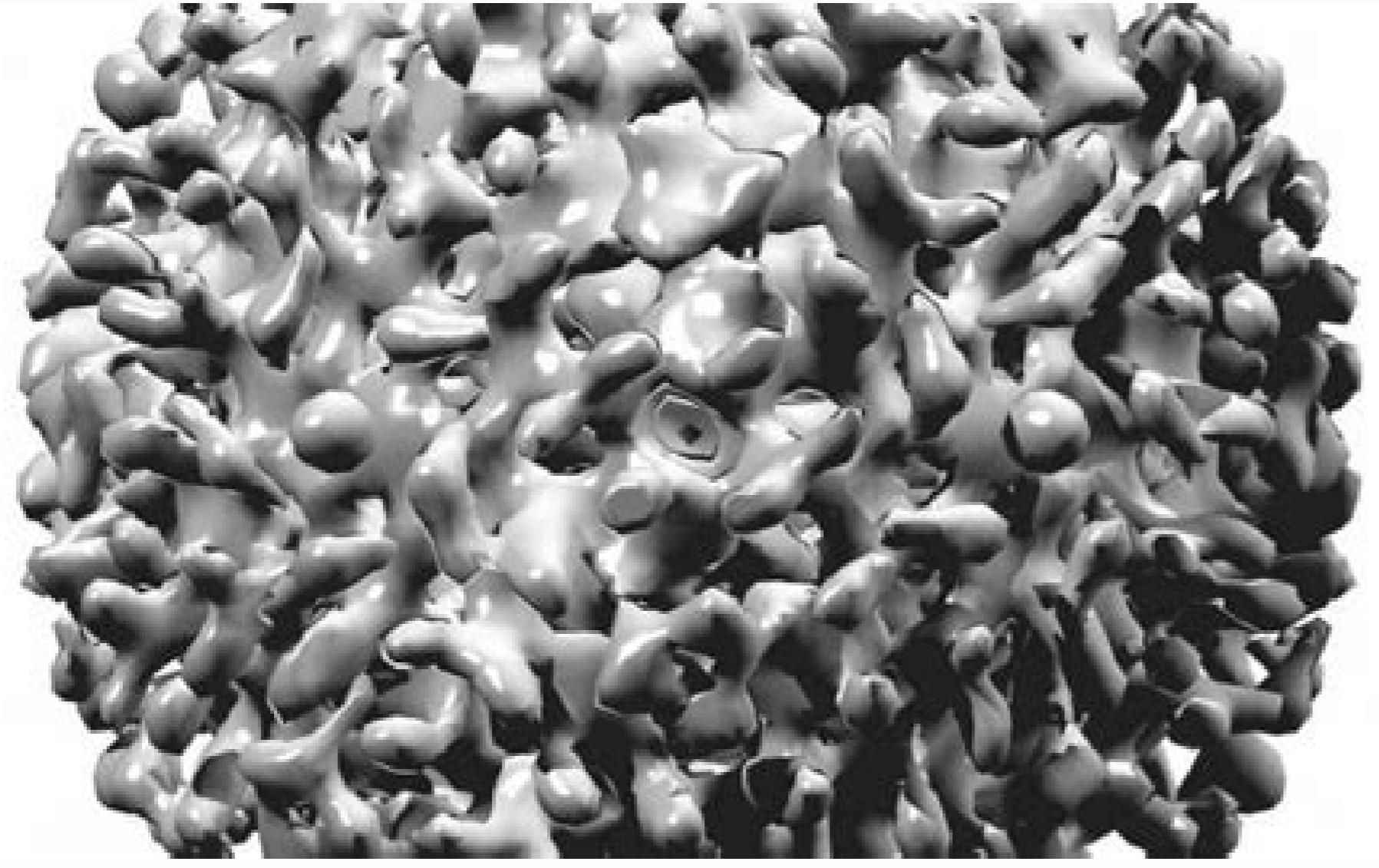


Injury*	Liver parameters						Other d o
	ALT (U/L)	ALT × ULN	AST (U/L)	ALP (U/L)	ALP × ULN	TB (mg/dl)	
1340	× 43	1284	—			9	Negative viral se hepatitis
1890	× 61	1140	425	× 1.8		26	Negative viral se
505	× 16	218	—			—	Negative viral se
138	× 4.5	84	112	× 0.5		0.6	Negative viral se muscle titers, : liver fat, coles
954	× 24	552	288	× 1.2		—	Alcohol consum hypothyroidism
1610	× 40	1507	244	× 2.3		11.8	
2513	× 46	1831	269	× 2		12.2	Normal abdomin viral serology
3269	× 82	3049	158	× 0.6		16.3	Negative viral se
2244	× 56	1810	261	× 2.5		23.7	Alcohol consum normal abdomin
159	× 4.5	45	—	—		—	Negative viral se
652	× 21	392	134	× 1.3		—	
1200	× 19	394	454	× 3.2		6.4	
—	—	—	—	—		—	
—	—	—	—	—		—	Negative viral se
—	—	—	—	—		—	Negative viral se echography: fa
88	× 2	84	1034	× 4		33.3	
necrosis*	—	—	—	—		—	Negative viral se autoimmune-li
2654	× 66	2049	204	× 2		7.7	Negative viral se
1922	× 48	1246	309	× 2.4		—	Negative viral se
922	× 14	702	201	× 1.5		6.5	Negative viral se

when it was available.

Reference 1.

Reference 2.



Erythema multiforme patient handout

Pitone, MD Many suspected ethiological factors have been reported to cause erythema multiforme (EM). Eruption can be the only signal, but sometimes children with erythema multiforme also feel tired having a low fever has muscle pain and joints have hands or feet swollen What causes erythema multiforme? An anterior history of erythema multiforme and male sex has also been reported as risk factors, but pregnancy can contribute to the development of multiform erythema too. Micemas know that erythema multiforme looking at him. How does the erythema multiformia diagnosed? What are the signs and symptoms of erythema multiforme? If you continue to return, the doctor can give a remedy to combat Afita's germ to maintain eruption. Less often a medicine causes it. In children, a germ causing lung infections can also trigger erythema multiforme. They grow over a few days at round spots that look like targets with red, rosy dwarfs and pallids. You can help your child treating the itch and pain and calling the doctor if you think your child is getting worse. Amithema Multiforme and Steven-Johnson's Sundrome can be induced by medicines, but infectious agents are also considered to be one of the main causes of Multiforme Erythema. Some medications that can cause a reaction are: antibiotics based on penicillin or sulfa Some anti-inflammatory anti-inflammatory drugs (NSAIDs), as ibuprofen is erythema multiforme contagious? Multiforme erythema goes away on the own account. Saúde Information for Parents Eritema Multiforme is an aliagic reaction. It does not cause a scar, but in some children you can leave darker spots on the skin for a few months. Micemas know that erythema Multiforme looking at him. The infectious causes are more common in children and are commonly involved in Multiforme. [11] Other folk infections, such as coccidioidomycosis, dermatophytosis and histoplasmosis and some parasitic infections, parasites, Trichomonas and toxoplasma species Gondii can trigger erythema multiforme. The most common trigger is the germ causing cold sores. If the cause is an infection, the doctor can handle it. The eruption is more frequently on both sides of the body. No, eruption can not spread from person to person. Antipyretic agents as triggers include analgesic, especially aspirin, in addition to phenylbutazone, oxyicalbutazone and phenazone. Other cutic eruptions may seem similar. Call the doctor if you think your child has erythema multiforme. More than 50% of cases of erythema multiforme greater are related to the use of medications, but no test probably proves the connection between a single case and a specific medicine. Some children receive a few points in the mouth. [22] Contactants that can induce an erythema multiforme Å¢ sponge of fire (tedania ignis), plant medicines, alpinia galanga), [23] isopropyl-p -phenylenodiamine rubber, nitrogen mustard, oxibenzone, phenylbutazone, poisonous ivy, [24] proflavin, resin, angelood and acetonide of triancinolone. This causes an eruption of points with dark centers and red pallids that look like a target or "bulls eye". Some points may have a small bubble or scabies in the middle. If Your child is diagnosed with erythema multiforme, call the doctor if your child has any of these problems: many points in the problem in the mouth drink liquid pain that is not better with pain medicine stains around of the eyes or the white part of the eyes look red Scoring the skin What else should I know? Antibiotics causing penicillin, ampicillin, tetracyclines, amoxicillin, cefotaxime, cefaclor, Ciprofloxacin, [13] erythromycin, minocycline, sulfonamides, trimethoprim-sulfamethoxazole and vancomycin. Can handle some serious cases with Remema. It does not cause a scar, but in some children you can leave darker spots on the skin for a few months. How can parents help? Multiforme Erythema (Air-UH-Thee-Muh Mul-Teh-For-Mee) starts with pink or red spots. This causes an eruption of points with dark centers and red paspones that look like a target or "eye-eye". Some points can have a small bubble or scabies in the middle. If your child has erythema multiforme caused by the cold sore germ, the eruption can return when the cold wounds return. The Multiforme Erythema is commonly triggered by Virus Herpes Simplex (HSV) (types 1 and 2), and HSV is the most common cause in young adults; In fact, many cases of more multiform idiopathic erythema can be precipitated by sub-dwelling HSV

cases of multiform erythema occurs because the body has an allergic reaction to an infection or a medicine. However, approximately 50% of cases are idiopathic, without identified precipitation factor. Other drugs that can cause multiform erythema include acarbose, albendazole, alendronate, [14] allopurinol, [12] arsenic, bromofluorene, quinine (quinine), cimetidine, clofibrate, corticosteroids, diclofenac, didanosine, dihydrogen, dichlorophosphate, estrogen, etrehy, fuconazole, griseofulvin, [15] stimulatory stimulation factor of macromag (GM-CSF), hydralazine, indapamide, imiquimod, [16] indinavir, lamotrigine, [12] Metazolamide, Mefloquine, Methotrexato, mimboprobanato, mercurials, minoxidil, nifedipine Nevirapine, [12] Nitrogen Mustard, Nivolumab, [17, 18] 18] Anti-inflammatory drugs non-steroidal (AINS), Phenolphthalein, Pyroxican, [12] Pyritinol, Progesterone, Potassium iodide, Secukinumab, [19] Sulindac, Suramin, Saquinavir, Thiafendazole, Thioracil, Terbinafine, Theophylline, Tramadol, [20] Vandetanib, [20] 21] Verapamil and phosphate dihydroxy. Suedima Revised: November 11, 2019 Revised by: Melanie L. If an infection causes the infection to spread. The following aspects were also reported as causes of multiform erythema: flavorings and preservatives, as benzoic and immunological disorders [25], such as the deficiency of selective C4 transition transition, [26] colony diseases Geno, Vasculitis, Sarcoidosis, Non-Hodgkin Lymphoma, Leukemia, Medital Meloma, myelotic metaplasia and physical or mechanical polycythemic factors such as tattoo, radiotherapy, cold and food for sunlight, including salmon berries and margarine Erythema multiforme is an allergic reaction. How is the multiform erythema treated? Often, the eruption begins in the arms, hands, legs and feet, then appears on the face, neck, diaper and body area. It can be difficult to wait until the eruption is left. As the eruption goes away, the skin where the blisters might seem dark for a few months, but it will not leave a scar. Bacterial infections that can trigger Multiform Erythema include Borrelia, catscratch disease, diphtheria, mollusca streptococci, leiomolysis, leprosy, neisseria meningitidis, COMPLEX, M Pneumococci, Tuberculosis, Spiro, Treponema Pallidum, [8] Tularemia, Vibrio, Paraemoliticus, Vincent disease and rickettsian infections. The erythema multiform role often disappears in 2 weeks, but can last for 4 weeks. To help discover what causes, the doctor will ask about any recent disease that the child had and any medicine he took. But another person who receives the infection can not get eruption. Among other infections, the mycoplasma species is another common cause of the rash. If the rash appears on the lips or mouth, it is called erythema multiforme, and if it appears on the eyes, it is called erythema multiforme. The rash on the eyes will not go away even if the doctor suggests a legal package. To help you feel better, the doctors can suggest a legal package in the eruption taking a fresh shower or shower using acetaminophen (such as tylenol or shop mark) for pain or fever. Some creams (like Benadryl, Claritin, zyrtec or store brand) putting creams on the skin to help with the itching these treatments are not going to do the eruption to go away more fast, but it will make a child feel better. Even the eruption had gone. If a medicine was the cause, the doctor will stop it and use a new if a medicine is still necessary. Causes of access include bacille calmette-guérin (BCG) vaccination, oral pale vaccine, vaccinia and tetanus / diphtheria. Tetanus / diphtheria.

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