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DERMATOLOGY IMAGES

Persistent skin staining following intravenous ferric carboxymaltose administration

Hiperpigmentação cutânea persistente após administração intravenosa de carboximaltose férrica

Inês Pereira-Amaral[1,2], Ivânia Soares[1,2], and Paulo Filipe[1,2]*

[1]Department of Dermatology, Hospital Santa Maria, Unidade Local de Saúde Santa Maria; [2]Department of Dermatology, University Clinic of Dermatology, Faculdade de Medicina da Universidade de Lisboa. Lisbon, Portugal

A 67-year-old female with *Fitzpatrick* skin type III presented for a dermatological evaluation with a well-defined brown-grayish patch measuring 20 cm, located on the dorsum of her right hand and extending to the forearm (Fig. 1). The lesion emerged shortly after the administration of intravenous ferric carboxymaltose through peripheral access on the dorsum of the hand, which was administered for iron deficiency related to heart failure, and became persistent after a few days.

Despite the passage of several years, the lesion showed no signs of improvement. A diagnosis of skin staining secondary to the intravenous administration of ferric carboxymaltose was established. This adverse effect, while rare, can be potentially irreversible and carries significant cosmetic concerns for affected individuals[1-3]. Laser therapy using a 755 nm alexandrite picosecond laser, planned at intervals of 4–6 weeks, was proposed to the patient; however, she declined the treatment due to the associated discomfort.

This case highlights the importance of informing patients about this potential adverse effect, emphasizing the importance of minimizing the risk of skin staining through improved administration techniques.

Figure 1. Skin staining after intravenous iron extravasation.

***Correspondence:**
Inês Pereira-Amaral
E-mail: ines.pereiraamaral@gmail.com

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Declaration on the use of artificial intelligence. The authors declare that no generative artificial intelligence was used in the writing of this manuscript.

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