

DIGITAL NECROSIS ASSOCIATED WITH CHRONIC MYELOID LEUKEMIA: A RARE PARANEOPLASTIC PHENOMENON... AND NOT A TOXICITY OF RECOMBINANT INTERFERON.

Sir,

We recently published in your journal a case report entitled: «Digital necrosis associated with chronic myeloid leukemia: a rare paraneoplastic phenomenon» (1). A few months later, Dr Mineur raised some doubt regarding the paraneoplastic origin of digital necrosis presented by our patient. He emphasized the role of interferon in the genesis of digital necrosis and described a case he observed where this toxic effect was due to interferon. We would like to bring some informations that rule out interferon in the genesis of digital necrosis observed in our patient. Firstly, the time elapsed between the discontinuation of interferon and the appearance of digital necrosis. Interferon was stopped 6 months before necrosis because it was incriminated in the Raynaud's phenomenon presented by the patient. Despite the discontinuation of interferon, vascular troubles increased and lead to necrosis digital. In the case presented by Dr Mineur, the vascular symptomatology, rapidly resolved after cessation of interferon as described by Reid et al (3). Secondly, for hematologic reasons rh-interferon α 2 A (Intron A® Schering-Plough) was restarted a few months ago and the patient remains without any sign of vascular problem. Interferon can certainly be the etiology of digital necrosis in several cases by different mechanisms (3,4) and we first incriminated it in our case but there were important arguments to exo-

nerate it. We believe that interferon is responsible of the digital necrosis presented in the case reported by Dr Mineur but the etiology in our patient was probably different. We agree with Dr Mineur that cessation of interferon therapy must be considered in case of digital necrosis or vascular abnormalities during treatment.

REFERENCES

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