

ESCITALOPRAM-INDUCED FACIAL HYPERPIGMENTATION AND UNILATERAL PERIORBITAL EDEMA: A RARE CASE IN THE PRESENCE OF DERMATOLOGICAL AND SYSTEMIC VULNERABILITY**Özgü Şişman¹, Erdem Kettaş²**¹*Department of Psychiatry, Bursa Yüksek İhtisas Training and Research Hospital, Bursa; Department of Psychiatry, University of Health Sciences Erenköy Mental Health and Neurological Diseases Training and Research Hospital, Istanbul, Türkiye*²*Department of Psychiatry, Bursa Yüksek İhtisas Training and Research Hospital, Bursa; Department of Psychiatry, Sancaktepe Sehit Prof. Dr İlhan Varank Training and Research Hospital, Istanbul, Türkiye*

OBJECTIVE: Selective serotonin reuptake inhibitors (SSRIs) are widely prescribed for depressive and anxiety disorders and are generally considered safe. Nevertheless, rare dermatological and immunological adverse reactions have been reported. This poster aims to present a rare case of facial hyperpigmentation and unilateral periorbital edema following escitalopram treatment, evaluated in the context of underlying dermatological sensitivity and systemic comorbidities.

CASE: (The patient consent must be provided and specified with appropriate terms). A 41-year-old woman presented to the psychiatry outpatient clinic with stress, generalized pruritus, and depressive symptoms. Her medical history included hypothyroidism and iron deficiency anemia, for which she was receiving oral iron supplementation. Due to persistent pruritus, she was also under dermatological follow-up. Following psychiatric evaluation, escitalopram was initiated at a dose of 10 mg/day.

On the 10th day of treatment, the patient developed brownish facial hyperpigmentation accompanied by marked swelling around the left eye, consistent with unilateral periorbital edema. No systemic symptoms, infectious findings, or alternative allergic triggers were identified. Considering a possible drug-induced

reaction, escitalopram was discontinued. After drug cessation, both the pigmentation and periorbital edema regressed rapidly.

Written informed consent was obtained from the patient for publication of this case.

DISCUSSION: This case illustrates rare dermatological adverse effects associated with escitalopram. Pre-existing pruritus and ongoing dermatological follow-up suggest increased cutaneous sensitivity. Additionally, systemic conditions such as

hypothyroidism and iron deficiency anemia may contribute to immune dysregulation, potentially predisposing patients to drug-induced hypersensitivity reactions. The rapid resolution of symptoms after discontinuation strongly supports a causal relationship between escitalopram and the observed findings. Clinicians should be attentive to atypical dermatological reactions during SSRI treatment, particularly in patients with dermatological vulnerability or systemic comorbidities, and interdisciplinary collaboration may facilitate timely diagnosis and management.

Keywords: Drug-induced hyperpigmentation, escitalopram, hypersensitivity reaction, periorbital edema, SSRI