Baclofen Induced Excessive Perspiration; A Case Report

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Abstract

Background: This case merits presentation due to the unexpected adverse effect of Baclofen, a long-established medication with a well-documented safety profile. The novelty lies in the rare manifestation of an excessive perspiration condition that is not commonly associated with Baclofen use. While the drug's adverse effects typically include sedation, confusion, and muscle weakness, excessive perspiration is not a frequently reported outcome. Understanding and documenting this adverse reaction is crucial for healthcare professionals, as it sheds light on Baclofen's lesser-known side effect profile. Exploring this case enhances our understanding of its pharmacological impact and informs future patient care and drug development endeavors.

Case Presentation: This case involves a 63-year-old woman with a complex medical history, including diabetes mellitus, essential hypertension, Hashimoto's thyroiditis, and chronic back pain caused by a motor vehicle accident. She has two spinal stimulators and has utilized long-term muscle relaxant use. The patient presented with a complaint of excessive sweating that worsened over the period of a year, describing a constant state of being drenched. Initial assessment attributed symptoms to the postmenopausal state, leading to the prescription of Venlafaxine. However, subsequent follow-ups showed persistent sweating despite dosage adjustments. In January 2023, extensive testing revealed mildly elevated cortisol, low serotonin, and normal thyroid function. Despite discontinuing thyroid medications, the sweating persisted, prompting the discontinuation of Baclofen, a previously well-tolerated medication. The patient reported a resolution of symptoms in February 2023 after the withdrawal of Baclofen. Notably, the excessive sweating linked to Baclofen was unprecedented after five years of use. This case emphasizes the importance of considering medication-related side effects, even with established drugs, and highlights the challenges in diagnosing and managing unusual adverse reactions.

Conclusions: This case report illustrates the clinical impact of Baclofen-induced excessive sweating, showcasing the infrequency of this adverse effect and underscoring its potential underreporting in existing literature. By presenting a diagnostic challenge and the subsequent resolution upon Baclofen withdrawal, the case emphasizes the need for increased awareness among healthcare professionals regarding unusual side effects associated with commonly prescribed medications. The study's significance lies in filling the knowledge gap regarding the incidence and prevalence of excessive sweating linked to Baclofen, a critical step toward understanding the full spectrum of its effects. This research sheds light on the profound impact of excessive sweating on patients' lives and advocates for increased awareness, accessibility to treatment, destigmatization, and further investigation into the prevalence of medication-induced sweating to improve patient outcomes and quality of life.