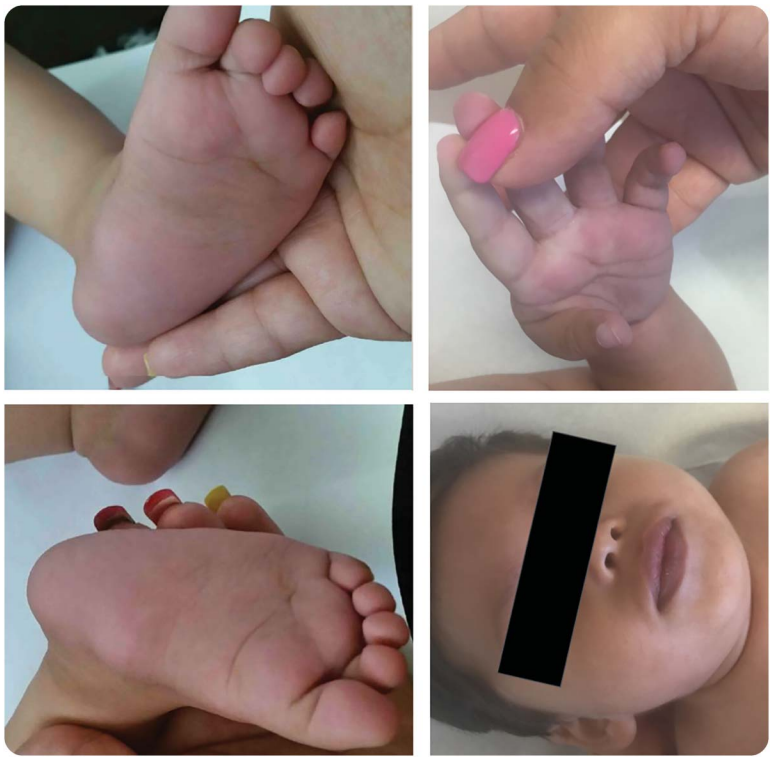
Quinidine-associated skin discoloration in *KCNT1*-associated pediatric epilepsy

Figure Skin discoloration after 9 months of quinidine use



The patient developed bluish discoloration of the hands, feet, and lips in a similar distribution to that seen in ezogabine-related skin discoloration. The sclerae were not affected. A dilated retinal examination has not been performed due to the severity of the patient's illness.

A 9-month-old boy with migrating partial seizures of infancy due to a de novo *KCNT1* mutation c.2278A>T (p.Ile760Phe) developed bluish discoloration of the hands, feet, and lips (figure) during a 9-month trial of quinidine (40 mg/kg/d; level 3.4 μg/mL).[1] There was no exposure to other medications that cause pigmentary changes. Given minimal improvement in seizures and development, quinidine was stopped. Discoloration persisted at 3 months but markedly improved by the 6-month follow-up. Though common with other potassium channel blockers (ezogabine and quinine), such discoloration has only rarely been reported with quinidine, all in adults.[2] Epileptologists should be aware of this potential complication of quinidine therapy.

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