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LETTERS TO THE EDITOR

Hypothermia from Azithromycin?

To the Editor:

The report "Hypothermia from Azithromycin" on the 3½-year-old girl is interesting.[1] I wonder, however, whether the authors are sure that the patient received only azithromycin. Is it possible that this patient also received an antipyretic? In our clinical trials of acetaminophen and ibuprofen, we have observed significant hypothermia (<35°C) in at least one normal Japanese subject. If the patient received an antipyretic, this should be considered as an alternative explanation for the observed hypothermia.

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Authors' Response:

We would like to thank Dr. Walson for his question. As we mentioned in our previous report,[1] this 3½-year-old girl with acute tonsillo-pharyngitis had a rectal temperature of 40°C and did not receive any medicine other than azithromycin. In our practice, tepid sponge bathing in warm water has been used as the first step to reduce high body temperature due to infection.[2,3] This method cannot be responsible for hypothermia[3] and none of the cases had hypothermia during the first 36-h period after tepid sponge bathing. Dr. Walson's skepticism may be appropriate; empiric trials to support the hypothesis are difficult. But in this case, we could not identify any cause of hypothermia other than the administration of azithromycin.

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