Black Tongue Due to Lansoprazole Plus Metronidazole

A 6-year-old girl was prescribed Metronidazole (20 mg/kg/day) plus lansoprazole (2 mg/kg/day) for *Helicobacter pylori* infection. At the second week, the child had black discoloration on tongue (*Fig. 1*) following the cessation of drugs. The black discoloration resolved in a week.

Superficial transient discoloration of the dorsum of the tongue may be caused by some foods, beverages and drugs (such as iron salts, bismuth, chlorhexidine, lansoprazole, amoxicillin, clarithromycin). When such discoloration noticeably affects the posterior dorsum of the tongue with longer filiform papillae and stained dark brown or black, the term ‘black hairy tongue’ is used. Black tongue (lingua nigra) refers to a black discoloration of the tongue, which may or may not be associated with hairy tongue.

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Purple Glove Syndrome Following Intravenous Phenytoin

Purple glove syndrome – characterized by purple discoloration and painful swelling of the hands like a glove – is an uncommon complication of intravenous phenytoin administration. A 1-day-old term asphyxiated neonate developed purple discoloration of hand 10 minutes after intravenous infusion of phenytoin, given for control of convulsions. The bluish purplish swelling of the hand extended up to elbow with ill-defined margin (*Fig. 1*). There was no tenderness, blistering, purulent discharge or mottling, Sensation and movements were normal. Oxygen saturation was 94% with low volume pulse and capillary refill time of 4-5 seconds. The color improved within 30-40 minutes of arm elevation and dry warm compresses. Complete recovery occurred in 72 hours.