Hiccup – A Side-Effect of Pulse Therapy

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Hiccup is an involuntary clonic spasm of the respiratory muscles (chiefly of the diaphragm but also the intercostal muscles) with sudden inspiration abruptly terminated by closure of the glottis [1]. The name 'hiccup' is imitative of the sound thus produced. The frequency of hiccup is usually 6-12/min but may be more, and the duration of an episode varies from minutes to days [1]. Though various causes of hiccup have been mentioned in the literature [2], overdistension of the stomach, gastric irritation and reflex oesophagitis are the common causes encountered in clinical practice [1]. Vagal stimulation either in the form of stimulation of the phrenic nerve or oesophageal afferent fibres is thought to be responsible for the reflex involuntary nature of hiccup.

We recently observed hiccup in 4 patients with pemphigus vulgaris who were treated with dexamethasone cyclophosphamide pulse therapy. Their ages ranged from 30 to 45 years, and none had a previous history of recurrent hiccup. The frequency of hiccup varied from 5 to 10/min lasting 10-30 min during intravenous infusion of pulse on every day. All 4 patients were on dexamethasone (136 mg daily for 3 days) and cyclophosphamide (500 mg on the 1st day) [3]. Patients did not complain of epigastric pain, dysphagia or epigastric distension. Serum electrolytes, blood urea and serum creatinine were within normal limits. Each episode of hiccup was controlled with metoclopramide, and the hiccups did not recur after stoppage of pulses. In 2 patients, however, these recurred only during successive pulses given at monthly intervals without any clinical or biochemical abnormalities.

Hiccup as a side effect of dexamethasone cyclophosphamide pulse therapy has not been reported earlier to the best of our knowledge. Whether it is due to reflex oesophagitis, gastric irritation or vagal stimulation or whether it is entirely an incidental unrelated phenomenon is a matter of conjecture. We would like to share this clinical observation of ours with others in the field.

References

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