Epidermal growth factor receptor inhibitors (EGFRIs) are an increasingly important class of anticancer agents. Cutaneous toxicities, the most common adverse effects of EGFRI therapy, require dose modification or treatment cessation when moderate or severe and may compromise treatment compliance. To date, assessment has focused on physical symptoms associated with cutaneous toxicities; however, the psychosocial impact of those effects requires greater consideration. This article reviews current knowledge of assessment of cutaneous toxicities and identifies gaps in evidence, with particular focus on the psychosocial impact of cutaneous toxicities. Promising new assessment tools and approaches including the use of electronic patient-reported outcome measures are discussed, as well as implications for research in evaluating psychosocial interventions.

Although EGFRIs have a more acceptable toxicity profile compared to other anticancer therapies (e.g., chemotherapy), adverse treatment effects unique to EGFRIs have been identified. The toxicities primarily are cutaneous, particularly papulopustular eruption, and have been described as “acneform” (Segaert et al., 2007). The prevalence and severity of the psychosocial impact of cutaneous toxicities have not been reported comprehensively. Patient-reported outcome measures can play a greater role in the assessment of cutaneous toxicities and their psychosocial impact, but they require further testing and validation.

**At a Glance**
- Epidermal growth factor receptor inhibitors have a favorable toxicity profile, but associated cutaneous effects can compromise compliance to treatment and reduce quality of life.
- The prevalence and severity of the psychosocial impact of cutaneous toxicities have not been reported comprehensively.
- Patient-reported outcome measures can play a greater role in the assessment of cutaneous toxicities and their psychosocial impact, but they require further testing and validation.