Epidermal growth factor receptor inhibitors (EGFRIs) continue to garner significant attention in cancer research (Boone et al., 2007; Hu, Sadeghi, Pinter-Brown, Yashar, & Chiu, 2007). Drugs in the EGFRI class include the monoclonal antibodies cetuximab and panitumumab, as well as the tyrosine kinase inhibitors erlotinib, gefitinib, and lapatinib (Lynch et al., 2007). To date, the drugs are used for a range of tumors, including lung, pancreatic, breast, head and neck, and colorectal cancers (Lynch et al., 2007). Research in EGFRI therapies has increased because the agents have demonstrated efficacy and more clinically acceptable toxicity profiles compared to other treatment options in clinical trials (Lacouture & Melosky, 2007). Interest also is significant in the potential clinical benefits of EGFRI and chemotherapy combination treatment (Perez-Soler, 2007). As a result, this article will explore the challenges in comprehensively assessing cutaneous toxicities associated with EGFRIs and make recommendations for further research.

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