We report the first case of valvular heart disease due to benfluorex. A 50-year-old woman who had been taking the anorectic agent benfluorex intermittently for one year developed severe fibrosis and regurgitation of the mitral, aortic and tricuspid valves. Clinical, echocardiographic and histopathological findings were analogous to those reported with fenfluramine and dexfenfluramine. The similarity between the histopathological lesion documented in patients treated with the appetite suppressants fenfluramine, dexfenfluramine and benfluorex and the valvular lesions reported in valve disease associated with ergot alkaloid use and carcinoid heart disease suggest a common pathophysiological mechanism and a central role for serotonin in the development of the disease.

Key words: Valvular fibrosis. Benfluorex. Appetite suppressant.
the immunological profile, were normal, and blood work was negative.

The patient continued to be symptomatic despite medical treatment, and underwent mitral valve and aortic valve exchange via disk prosthesis, in addition to tricuspid valvuloplasty. The macroscopic aspect of the cardiac valves showed diffuse fibrosis. There was shortening of the mitral cords (Figure 1), a thickened tricuspid valve, and retraction of the cusps of the aortic valve. Microscopic examination of the valves revealed the presence of dense fibrous plaques made up of myofibroblasts in a matrix of mucopolysaccharides and collagen that produced a retraction of the normal value endothelium (Figure 2). The postoperative course was normal, and the patient was discharged from the hospital ten days later.

**DISCUSSION**

The histological lesion described is identical to that observed in valve disease associated with the anorexigens fenfluramine and dexfenfluramine,8-10 to carcinoid heart disease,11,12 and to valve disease caused by ergotamine alkaloids.13 This gives rise to the thought that serotonin has a central physiopathological role in the genesis of these valve lesions, given the similarity in the chemical structure of serotonin, ergotamine, and methysergide.13 The effect of fenfluramine, dexfenfluramine, and benfluorex on the liberation of serotonin in the brain, inhibiting its re-absorption, as well as its effect on the liberation of serotonin from plaque granules may be the mechanism responsible for valve fibroproliferation; this hypothesis is becoming more and more solid as time goes by.

**REFERENCES**