References

Chapter 11: Drug- and Toxin-Induced Liver Diseases

Hepatocellular necrosis with minimal to absent inflammation
- Acetaminophen

Acute hepatocellular necroinflammatory change
- Chlorpropamide, halothane, bupropion, nitrofurantoin, isoniazid

Chronic hepatocellular necroinflammatory change
- Methotrexate, ethanol, minocycline

Steatosis and steatohepatitis
- Ethanol, cocaine, vitamin A, sulfasalazine

Granulomas
- Sulfasalazine, chlorpromazine

Mallory–Denk bodies
- Amiodarone

Acute cholestatic liver injury
- Oral contraceptives, isoniazid

Chronic cholestatic liver injury
- Chlorpromazine, chlorpropamide

Vascular injury
- Chemotherapy in bone marrow transplantation (busulfan)

Neoplasms and related lesions
- Oral contraceptives, oxymetholone

Acetaminophen


Michaul A, Moreau C, Robin MA, et al. Acetaminophen-induced liver injury in obesity...
References

Chinese patients with or without baseline liver dysfunction. *Clin Cardiol* 2006;29:295–9.


Bupropion


Chemotherapy in Bone Marrow Transplantation (Busulfan)


Chlorpromazine


Ishak KG, Irey NS. Hepatic injury associated with the phenothiazines: clinicopathologic and follow-up study of 36 patients. *Arch Path* 1972;93:283–304.


Chlorpropamide


Cocaine


References


Ethanol (see references in Chapter 3)

Halogenated Hydrocarbons (Halothane)


Isoniazid


**Methotrexate**


Minocycline


Nitrofurantoin


Oral Contraceptives


**Oxymetholone**


**Sulfasalazine**


Ransford RA, Langman MJ. Sulphasalazine and mesalazine: serious adverse reactions re-evaluated on the basis of suspected adverse reaction reports to the Committee on Safety of Medicines. Gut 2002;51:536–9.

**Vitamin A**

Russell RM, Boyer JL, Bagheri SA, et al. Hepatic injury from chronic hypervitaminosis A resulting

**General References**