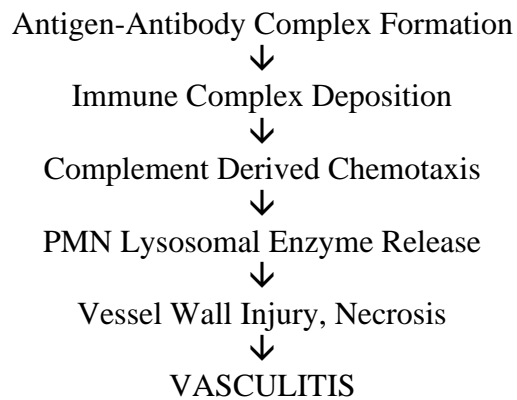


VASCULITIS

Definition: Inflammation with necrosis of blood vessels resulting in variable clinical presentations depending upon:

1. size of vessel
2. type of vessel
3. histological infiltrate

Pathophysiology:



I. Vasculitis - Types

A. Hypersensitivity Group (Leukocytoclastic)

1. Vessel type: small, usually post capillary venules
2. Symptoms: Skin-Palpable Purpura
 - a vesicles, bullae, ulceration
 - b urticaria (collagen vascular disease)
3. Systemic:

- a Joints--arthritis (50%)
- b Renal--hematuria
- c Other--GI tract

4. Etiology:

- a Infectious (Strep, viral, Rickettsial)
- b Drug Reaction
- c Collagen vascular disease
- d Cryoglobulinemia
- e Internal Malignancy
- f Henoch-Schonlein Purpura
 - i Palpable purpura (dependent areas-legs and buttocks)
 - ii Abdominal pain
 - iii Arthritis
 - iv Hematuria
 - v Increased IgA
- g Idiopathic

5. Laboratory work-up

- a CBC, Platelets
- b Urinalysis, BUN, Creatinine
- c Chest x-ray
- d ANA
- e Cryoglobulins
- f Serum Protein Electrophoresis

g ESR (nonspecific)

6. Differential Diagnosis:

a Thrombocytopenia

b Sepsis

7. Treatment

a removal of offending agent

b steroids

c dapsone

B. Polyarteritis Group (Periarteritis)

1. Polyarteritis Nodosa

a Vasculitis of small-medium sized arteries with segmental (skip) involvement.

b Symptoms:

i Constitutional

ii Renal--hypertension, glomerulonephritis

iii Neuromuscular--arthritis, myalgia, sensorimotor neuropathy (mononeuritis multiplex)

iv Gastrointestinal--functional

v Cutaneous--Livedo reticularis, Nodules (painful shiny red nodules in crops usually on lower extremities), Ulcerations

vi Other--cardiac, CNS

c Laboratory Work-Up: Nonspecific

d Treatment:

- i Steroids (50% 5 yr. survival)
- ii Cyclophosphamide (80% 5 yr. survival)
- iii None (10% 50 year survival)

2. Churg-Strauss

- a Allergic granulomatous angiitis
- b Asthma, Eosinophilia
- c Pulmonary vessel involvement--100%
- d Splenic involvement--70%

C. Granulomatous

1. Wegener's Granulomatosis

- a Granulomatous vasculitis of upper and lower respiratory tract, glomerulonephritis, and other small arteries
- b Symptoms:
 - i Respiratory Tract--100%
 - ii sinusitis, rhinitis, septal destruction, cough, dyspnea
 - iii Renal--80% glomerulonephritis
 - iv Cutaneous--40-50% nodules, ulcers
 - v Other--joints, CNS, cardiac
- c Laboratory work-up
 - i ESR markedly elevated
 - ii Chest x-ray (cavitary lesions, nodules)
- d Treatment:
 - i 90% 2 yr. mortality without treatment

ii cyclophosphamide and steroids

2. Giant Cell Arteritis

- a Temporal Arteritis (Polymyalgia Rheumatica)
- b Giant cell infiltrate of large arteries (temporal, carotid)
- c Severe, disabling musculoskeletal pain,
- d Blindness without immediate steroids in high doses
- e ESR extremely elevated (over 100)

II. SYSTEMIC DISEASE

A. Pruritus

- | | |
|----------------------------------|-----------------|
| 1. Thyroid (hyper- or hypo) | TSH, T4 |
| 2. Renal disease | BUN, Creatinine |
| 3. Hepatic disease | LFT's |
| 4. Malignancy (Hodgkins Disease) | Chest x-ray |
| 5. Polycythemia vera | CBC, platelets |
| 6. Diabetes | glucose |

B. Endocrine

1. Adrenal

a Addison's Disease

- i Hypoadrenalism
- ii generalized bronzing
- iii dark pigmentation on gums

b Cushing's

- i Hyperadrenalism
- ii moon facies
- iii buffalo hump
- iv hirsutism
- v acanthosis nigricans

2. Thyroid

- a hyperthyroidism--pretibial myxedema, thyroid acropachy
- b hypothyroidism--myxedema, alopecia, xerosis, macroglossia

3. Diabetes Mellitus

- a Necrobiosis Lipoidica Diabeticorum
- b Diabetic Dermopathy

C. Malignancy

- 1. Pruritus
- 2. Dermatomyositis
- 3. Acanthosis Nigricans
- 4. Acquired Ichthyosis
- 5. malignant down - lanugo hairs

D. AIDS

- 1. Oral hairy leukoplakia--EB virus
- 2. Kaposi's Sarcoma
- 3. Sudden, severe Seborrheic Dermatitis
- 4. Molluscum contagiosum-- refractory
- 5. Unusual or opportunistic infections

6. Bacillary angiomatosis
7. Chronic cutaneous herpes virus infections
8. Lipodystrophy