



AUTOIMMUNE BULLOUS DISEASES

DIRECT IMMUNOFLUORESCENCE PATTERN ANALYSIS OF NEWLY DIAGNOSED DERMATITIS HERPETIFORMIS PATIENTS

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Introduction: Dermatitis herpetiformis (DH) is a rare autoimmune bullous dermatosis that is now considered to be the cutaneous manifestation of celiac disease (CD). Direct immunofluorescence (DIF) microscopy is part of the gold standard diagnostic algorithm of DH, which is mainly characterized by granular IgA deposits in the papillary dermis. Other DIF patterns have also been reported in the literature, which indicates the need for further investigation.

Objective: Our aim was to perform a DIF pattern analysis of newly diagnosed DH patients among the Bulgarian population.

Materials and Methods: Twenty-three consecutive untreated patients with DH were included in the study (male to female ratio 1.3, age range 12-72 years). The diagnosis of DH was established on commonly accepted criteria, including clinical data, histology and DIF. Perilesional biopsies were performed for DIF analysis.

Results: All patients demonstrated IgA deposition at the dermo-epidermal junction (DEJ) with variations. The majority of cases (19 samples) revealed granular deposition of IgA along the DEJ with papillary tips accentuation. Two patients exhibited granular IgA confined to the dermal papillae only. Two cases demonstrated fibrillar deposits along the DEJ. Some of the samples had additional deposits such as IgM and/or C3 along the DEJ or papillary tips. One patient demonstrated perivascular deposition of IgA in the upper dermis.

Conclusions: Our findings demonstrate variable DIF patterns among Bulgarian DH patients. Further studies need to be performed to correlate demographic, clinical, histologic and immunologic data. We believe that such studies may lead to the description of different subtypes of DH with important diagnostic and prognostic values.

