



VASCULAR DISEASE, VASCULITIS

## CHOLESTEROL EMBOLI MIMICKING NECROTIZING VASCULITIS

Ângela Roda<sup>(1)</sup> - A. R. Travassos<sup>(1)</sup> - L. Soares-de-almeida<sup>(2)</sup> - P. Filipe<sup>(2)</sup>

*Hospital De Santa Maria, Dermatology, Lisbon, Portugal<sup>(1)</sup> - Hospital De Santa Maria, University Clinic Of Dermatology, Institute Of Molecular Medicine, Dermatology, Lisbon, Portugal<sup>(2)</sup>*

**Background:** Cholesterol crystal embolism is a great diagnostic challenge, often simulating other diseases. It usually occurs after a precipitating event, such as endovascular procedures, or in association with anticoagulant therapy. Virtually, all organs can be affected. The skin is commonly involved.

**Observation:** We describe the case of an 82-year-old man with a history of coronary disease, hypertension, hypercholesterolemia and atrial fibrillation, anticoagulated with warfarin, who was admitted to our Dermatology Department for purpuric and necrotic plaques in the upper and lower limbs, with a 4-month evolution. Erosions of the nasal mucosa were also observed.

Six months before the appearance of the cutaneous lesions, the patient had undergone coronary angiography.

Laboratory evaluation was unremarkable and included autoimmunity (ANA and anti-neutrophil cytoplasm antibodies - MPO and PR3), viral serologies (HIV, HBV, HCV) and cryoglobulins.

The skin biopsy revealed clefts of cholesterol inside the arterioles in the dermis. The direct immunofluorescence of the perilesional skin was negative.

The oral anticoagulant was withdrawn. The patient was treated with oral prednisolone and statins, with progressive improvement of cutaneous lesions.

**Key Message:** This clinical case illustrates a rare cutaneous manifestation of obstructive vasculopathy caused by cholesterol crystals, mimicking a necrotizing vasculitis.

