Dermatitis herpetiformis (Duhring's disease)
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Dermatitis herpetiform is an intensely pruritic, chronic recurrent dermatitis that has a slight male predilection. The disease is associated with gluten-sensitive enteropathy and an increased but rare risk of lymphoma. Dermatitis herpetiform is in association with SLE has also been reported.
Histopathology
The typical histologic features are best observed in erythematous skin adjacent to early blisters. In these zones, the rete ridges lose their attachment to the dermis, and the blisters then become unilocular and clinically apparent. At this time, the characteristic papillary microabscesses may be observed at the blister periphery. For this reason, the inclusion of perivesicular skin in the biopsy specimen is of importance.
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utmost value. The papillary dermis beneath the papillae may have a relatively intense inflammatory infiltrate.

*IF Testing*
In 1967, Cormane described the presence of granular deposits of IgA within the dermal papillae in both lesional and nonlesional skin in patients with dermatitis herpetiformis. The presence of IgA deposits within the dermal papillae is a strong indication that the patient has dermatitis herpetiformis. However, false-negative results may occur when blistered or inflamed skin is evaluated.
Circulating IgA antibodies that react against reticulin, smooth muscle endomysium, the dietary antigen gluten are responsible for the inflammatory reaction in the gut. These antibodies are present in 52% to 100% of patients with dermatitis herpetiformis. The pathogenesis of this disease is complex and involves the interplay of genetic, environmental, and immunological factors.

Pathogenesis

Three important findings must be considered in the pathogenesis of dermatitis herpetiformis:
spruelike changes on jejunal biopsy. Patients with celiac disease develop IgA autoantibodies to tissue transglutaminase.
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The IgA deposition results in activation of the complement system followed by chemotaxis of neutrophils.
Ultrastructural Study

The changes in dermatitis herpetiformis resemble those observed in the inflammatory bullae of bullous pemphigoid.
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