

Volume 9

Advances in
Dermatology

Callen · Dahl · Golitz
Greenway · Schachner

Advances in Dermatology

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Volume 9 • 1994

 **Mosby**

St. Louis Baltimore Boston Chicago London Madrid Philadelphia Sydney Toronto



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Project Manager: Denise Dungey

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Printed in the United States of America

Composition by The Clarinda Company

Printing/binding by The Maple-Vail Book Manufacturing Group

Mosby—Year Book, Inc.

11830 Westline Industrial Drive

St. Louis, Missouri 63146

Editorial Office:

Mosby—Year Book, Inc.

200 N. La Salle St.

Chicago, Illinois 60601

International Standard Serial Number: 0882-0880

International Standard Book Number: 0-8151-1392-7

Drug Eruptions: A Review of Clinical and Immunological Features, *by Richard S. Kalish*
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Preface

Each year, as editor-in-chief, I am asked to highlight the importance of the contributions within the current volume. As editors of this, our ninth edition of *Advances in Dermatology*, we are grateful for the continued efforts of the editorial and production staff at Mosby–Year Book, Inc., who continue to produce a high-quality final product at a reasonable cost for our readers. We have taken into advisement feedback from our readers' surveys in selecting our topics. Also, we have evaluated the dermatologic as well as nondermatologic literature in order to select topics that are state-of-the-art, yet practical and easily accessible.

Our editorial board is well-balanced within our broadening and complex specialty, and includes individuals who have been distinctly identified as subspecialists in pediatric dermatology (Dr. Schachner), dermatopathology (Dr. Golitz), dermatologic surgery (Dr. Greenway), the basic science of dermatology (Dr. Dahl), and internal medicine (myself). Each December this group gathers to plan the upcoming volume. As editor-in-chief I have noted that over the years we have often come to our board meeting with very similar plans for our subjects. This volume is no different in that several of the topics could have easily appeared in more than one section.

We hope that the information in this latest volume of *Advances* will enhance the ability to diagnose and treat skin disease, promoting a deeper understanding of the complexities of our specialty. This newly acquired or refreshed knowledge will assuredly translate into better care for our patients.

Jeffrey P. Callen, M.D.
Editor-in-Chief

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Part I

***Internal Medicine: Therapeutics and
Skin Diseases***

Edited by
JEFFREY P. CALLEN, M.D.

The Differential Diagnosis of Purpura From a Morphologic Perspective

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The accurate differential diagnosis of purpura and vasculitis is critically important, since different etiologic factors can have profoundly different implications for therapy and prognosis. In fact, however, because the differential diagnosis often is influenced greatly by the physician's speciality and background, examining physicians are likely to come to different conclusions about the etiology of purpuric lesions in a particular patient.

This chapter presents an approach to the classification and analysis of purpura that established correlations between lesional morphology and specific pathophysiologic mechanisms. This system has evolved during a 17-year struggle to understand the pathophysiology of purpura and vasculitis from my viewpoint as an internist, a hematologist, and a dermatologist. With this system, the differential diagnosis becomes a process of recognizing important but sometimes subtle and often overlooked subsets of purpura, and then matching the morphologic attributes to the most likely pathophysiologic mechanisms. In my experience, this match often can be confirmed with appropriate laboratory testing, limiting wide-ranging laboratory testing to the exceptional case. At the very least, the adoption of this system should lead to a greater appreciation of the diagnostic information that can be gleaned from the examination of early lesions of purpura. It also, in some cases, may suggest the need for specific and important intervention before laboratory results are available.

Defining Purpura

One of the major problems in understanding purpura is the tremendous variation in the use of terms such as purpura, petechia, or ecchymosis.¹⁻⁴ One clinician's purpura is another clinician's petechiae. Some consensus does exist, however, and the terms as they are used in