20 Vasculitis and Vasculopathy

Vasculitis is characterized by damage to the vascular endothelium and necrosis of the vessel wall; vasculopathy demonstrates intravascular thrombosis often without significant inflammation. Leukocytoclastic vasculitis is characterized by the presence of neutrophils, nuclear dust (leukocytoclasia) and fibrinoid necrosis of vessel walls.

Table 20.1 Characteristics of vasculitis and vasculopathy

	Mixed cryoglobulinemia, Protein C deficiency, DIC, Sepsis, Lupus anticoagulant	Purpura fulminans, Monoclonal cryoglobulinemia, Coumadin (Warfarin) necrosis	Lymphocytic vasculitis, Drug-induced	Bechet's disease, Perniosis
Intraluminal vascular thrombi	–/+	+	+/–	–/+
Vascular wall necrosis	+	–/+	+/–	+/–
Neutrophils, leukocytoclasia	+	–	–	–/+
Eosinophils	–	–	+/–	–/+
Lymphocytes	–	–	+	+

DIC disseminated intravascular coagulopathy

K.S. Masterpol et al., *Atlas of Essential Dermatopathology*,
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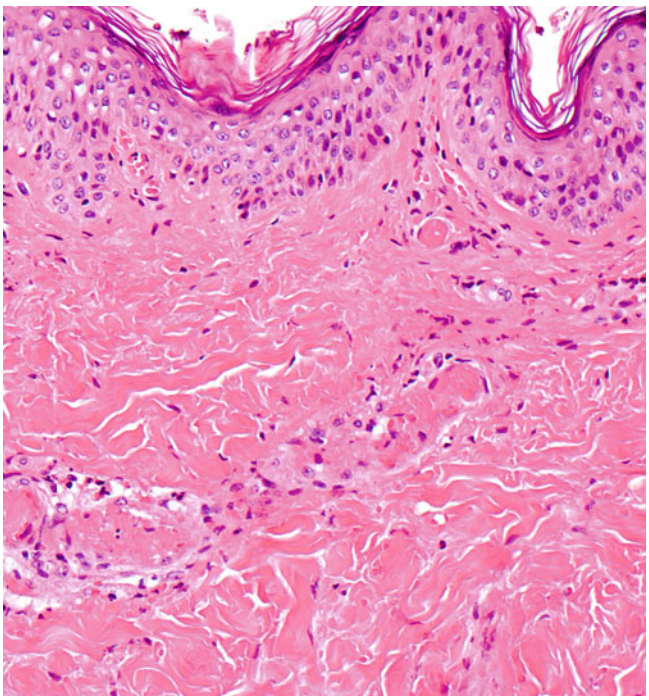

Fig. 20.1 Purpura fulminans. The superficial dermal vessels are occluded by microthrombi, there is minimal inflammation

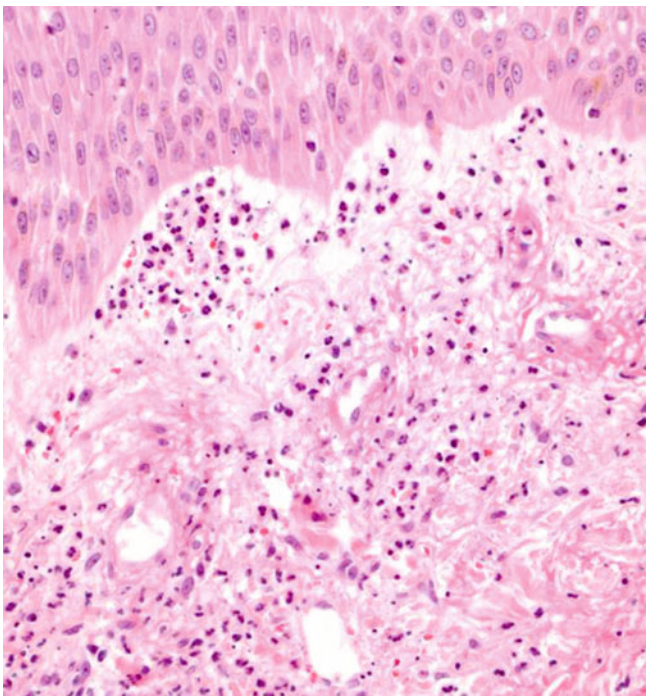

Fig. 20.3 Henoch - Schoenlein purpura (HSP). There is a leukocytoclastic vasculitis, characterized by the presence of nuclear debris and fibrinoid necrosis of the vessel wall

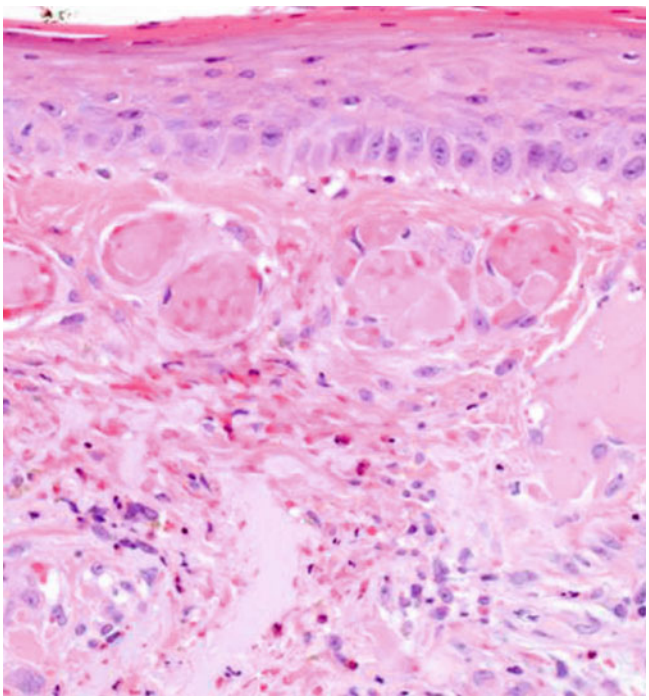

Fig. 20.2 Monoclonal cryoglobulinemia. The superficial dermal vessels are occluded by homogeneous thrombi that may be clefted, there is minimal inflammatory infiltrate

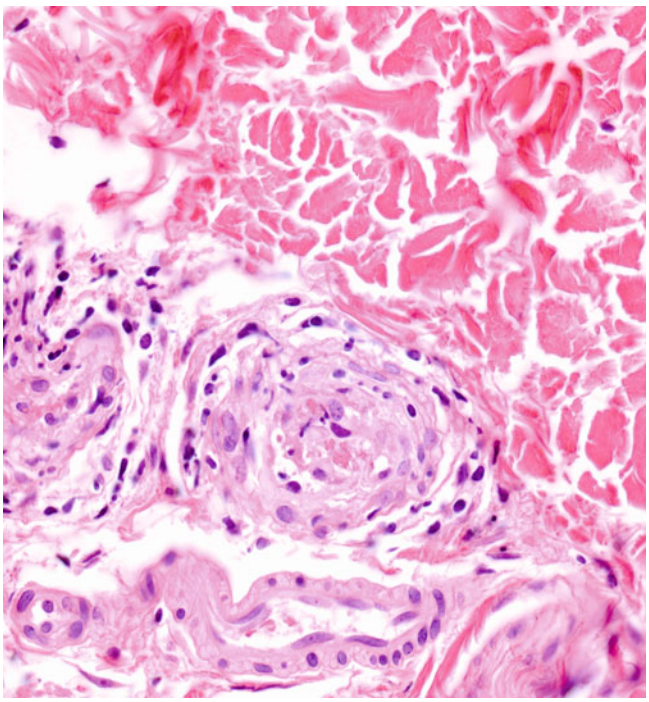

Fig. 20.4 Perniosis. There is a lymphocytic vasculitis without significant neutrophilic infiltrate or intraluminal thrombi