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In 1978 a 48-year-old man developed an exanthema mainly localized to sun-exposed areas. Biopsy was consistent with discoid lupus erythematosus. Immunofluorescence investigations showed granular deposits of IgG and C3 in a linear fashion at the dermo-epidermal junction which are consistent with discoid lupus erythematosus [1].

In 1980, still having lupus erythematosus exanthema, he developed a vesicobullous exanthema localized to the extensor aspect of the arms and legs, and to the upper part of the trunk. Direct immunofluorescence showed a very strong granular deposit of IgA along the junction area. Besides, there were scanty deposits of IgG and IgM in the same area. Our patient was positive to HLA antigens B8 and DR 3. These findings are consistent with dermatitis herpetiformis [2].

Biopsy from the small intestine revealed some degree of atrophy of the intestinal villi. On treatment with sulfones and gluten-free diet the vesicobullous exanthema disappeared, but he still had discoid lupus erythematosus.

This case shows the coexistence of discoid lupus erythematosus and dermatitis herpetiformis. The clinical findings and immunofluorescence patterns showed, at the same time, both lupus erythematosus and dermatitis herpetiformis. To our knowledge this has not previously been reported.

References

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