A 59-year-old woman was admitted to the dermatology section for a skin eruption. She was initially diagnosed as having a drug-induced skin rash. Endoscopic examination performed for severe abdominal pain and melena revealed a reddish elevated lesion with an ulceration on the top in the descending part of her duodenum (Picture 1). While a duodenal tumor was suspected, a biopsy was not performed due to fear of causing further bleeding. At the same time, the diagnosis of Henoch-Schönlein purpura (HSP) was made for purpura which had developed on her lower legs (Picture 2). The tumor-like lesion had vanished completely at the second endoscopic examination after steroid therapy. It is speculated that vasculitis associated with HSP caused the local edema, hyperemia and ulcer formation via ischemia, which ultimately led to the lesion mimicking a tumor. Careful attention needs to be paid to non-typical mucosal lesions in patients with HSP.

References