

CASE REPORT OF GRAVE'S DISEASE WITH MEDIUM VESSEL VASCULITIS ON BIOPSY

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26 year-old female lawyer who was first diagnosed to have Grave's disease in our Endocrinology clinic, when she presented with palpitations, protruding eye balls, progressive weight loss good appetite, heat intolerance and a small goiter and confirmatory TFT results. She was controlled with (and maintained on) 10mg of carbimazole. She also had flesh-colored swellings, with areas of hyperpigmentation and induration on her shins, as well as hyperpigmented patches on her ankles. The lesions were diagnosed as pre-tibial myxedema. She had a punch biopsy of the lesion, a year after she had been on carbimazole, because of her increasing concern about the lesions. Histology report showed a macroscopic specimen consisting of negroid skin tissue while histologic section shows the dermis having widespread collagen tissue, indicating increased ground substance; the vessels in the subcutis show swollen endothelial walls and perivascular lymphocytic infiltrates. The epidermis was normal. Conclusion was that of pre-tibial myxedema with vasculitis of medium vessels.

She had no other features of systemic vasculitis or connective tissue disease. Serum pANCA was done and was negative confirming the vasculitis was unrelated to carbimazole use. Her connective tissue disease or ENA screen showed no evidence of connective tissue disease.

In conclusion, the presence of the medium-vessel vasculitis may be a reflection of the autoimmune nature of Grave's disease