

DERMATITIS HERPETIFORMIS: A POSSIBLE CUTANEOUS MANIFESTATION OF CELIAC DISEASE

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Summary

Dermatitis herpetiformis (DH) is a chronic, relapsing, intensely pruritic blistering disease of the skin characterized by granular deposits of IgA immunoglobulin in the tips of dermal papillae. This disease is associated with a gluten sensitive enteropathy which is identical to but usually less severe than celiac disease (CD). On the basis of many reasons, DH is currently considered to be CD of the skin. The vast majority of patients with DH have been found to have lesions of the small bowel, which are indistinguishable from those found in CD. Furthermore, patients with DH and CD have the same HLA-DQ association, an increased ratio of gdT cells in the small intestinal mucosa and circulating antigliadin, antireti-culin, antiendomysium as well as antitransglutaminase antibodies. Recently, there has been demonstrated that in DH, the immune precipitates contain epidermal trans-glutaminase, an enzyme not previously detected in the papillary region of normal skin. Serum IgA in DH has been found to bind to epidermal transglutaminase. These findings may relate to the fact, that DH is associated with gluten sensitive enteropathy CD, which is characterised by IgA type autoantibodies to a closely related enzyme, tissue transglutaminase. The two transglutaminases are highly homologous, and therefore, cross reactivity of the two antibodies might explain why patients with gluten sensitive enteropathy with or without skin diseases, generally have serum autoantibodies to both enzymes. Moreover, both disease require patients to follow life-long gluten free diet.

Conclusion. *Present data suggest that DH is a skin manifestation of CD and that similar mechanisms might be responsible for the intestinal and cutaneous lesions.*

Key word: *dermatitis herpetiformis, coeliac disease.*