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DERMATITIS HERPETIFORMIS

Dermatitis herpetiformis (Duhring's disease) is a chronic, inflammatory, pruritic, skin disease characterized by intensely itchy, chronic, papulosquamous lesions. The disease is typically characterized by a dramatic response to gluten-free diet.

**Clinical Features**
- **Primary Lesion:** The primary lesion of DH is an erythematous papule or papulovesicle, often with a yellow or brown crust. The lesions are typically located on the extensor surfaces and the flexures, such as the elbows, knees, and buttocks.
- **Distribution:** The lesions are often grouped, with a predilection for the extensor surfaces and the flexures.
- **Duration and Course:** The lesions can be intermittent, with periods of exacerbation and remission. The course can vary from a few weeks to several years.
- **Complications:** DH can lead to a variety of complications, including gastrointestinal involvement, malignancy, and osteoporosis.

**Pathogenesis**
- **Histology:** Histologically, DH is characterized by the deposition of IgA and neutrophils in the subepidermal region, forming a subepidermal blister.
- **Autoimmunity:** The disease is believed to be autoimmune, with the role of gluten in triggering the immune response being well established.
- **Association with Celiac Disease:** Many DH patients have an associated gluten-sensitive enteropathy, and a gluten-free diet is effective in treating both DH and enteropathy.

**Diagnosis**
- **Clinical:** The diagnosis of DH is made on the basis of the characteristic skin lesions and the response to a gluten-free diet.
- **Histology:** Biopsy of the skin lesions reveals IgA deposits in the subepidermal region.
- **Laboratory:** A gluten-free diet is effective in treating both DH and enteropathy.

**Treatment**
- **Gluten-Free Diet:** The gluten-free diet is the mainstay of treatment for DH.
- **Other Therapies:** Other treatments, such as dapsone, sulfones, and immunosuppressants, may be used in refractory cases.

**Complications**
- **Enteropathy:** Many DH patients have an associated gluten-sensitive enteropathy, and a gluten-free diet is effective in treating both DH and enteropathy.
- **Malignancy:** There is an increased risk of malignancy in DH, particularly lymphoma.
- **Osteoporosis:** There is an increased risk of osteoporosis in DH, with a tendency towards decreased bone mineral density.

**References**
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