

Evaluation of small-intestinal abnormalities in adult patients with Henoch–Schönlein purpura using video capsule

Henoch–Schönlein purpura (HSP) is a systemic vasculitis mediated by IgA and characterized by the clinical manifestations of nonthrombocytopenic palpable purpura, abdominal pain, arthritis, and renal disorder [1,2]. Gastrointestinal symptoms occur in up to 85% of patients with HSP and abnormalities may be observed throughout the gastrointestinal tract, especially in the small bowel [3]. The characteristics of the small-intestinal lesions in five adult patients with HSP were retrospectively

evaluated using video capsule endoscopy (VCE). None of the patients experienced any adverse events. In three of the five examinations, the battery of the VCE became exhausted before the device reached the cecum. It did however detect small-intestinal lesions in all cases. In contrast, for two of the patients computed tomography (CT) was able to detect only small-intestinal edema. VCE findings were classified as petechiae/redness, or erosions/ulcers. Petechiae/redness, which was referred to as “intestinal purpura”, was observed throughout the small intestine in all cases (● Fig. 1). Erosions/ulcers were observed in four patients (● Fig. 2). A biopsy sample obtained by balloon enteroscopy from a petechial area showed extravasation of red blood cells in villi with mild inflammation (● Fig. 3). VCE is useful for comprehensive evaluation of small-intestinal HSP lesions that may not be detected by CT.

Endoscopy_UCTN_Code_CCL_1AC_2AD

Competing interests: None



Fig. 2 Capsule endoscopic image of the ileum. An area of circumferential redness and edema, and an ulcer with mucus can be seen.

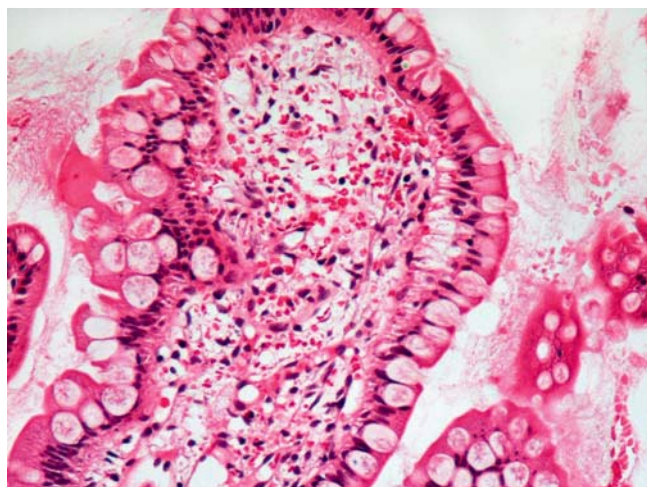


Fig. 3 Histopathological findings of the ileal purpuric lesion, which shows extravasation of red blood cells into the villi. (Hematoxylin and eosin, original magnification $\times 100$.)

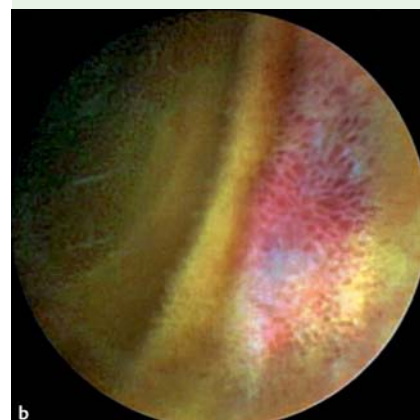
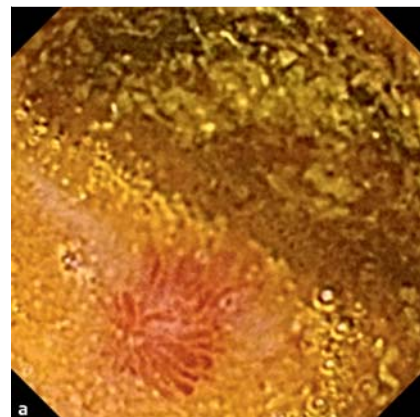


Fig. 1 a – c Three capsule endoscopic images, which show small-intestinal redness. These small reddish areas, which consist of intravillous hemorrhage with slight edema, were observed throughout the whole small intestine in all patients.

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