



HENOCH-SCHONLEIN PURPURA

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Henoch-Schonlein Purpura (HSP) is a disorder in which inflammation occurs inside the small vessels of the body. The broad technical term for vessel inflammation is "vasculitis." In HSP, this inflammation results from deposits of a type of immunoglobulin (proteins that circulate inside our body to help fight off infections), called immunoglobulin A. The deposition of immunoglobulin A and other inflammatory components in HSP results in a vasculitis found in the skin, the gastrointestinal system, the joints and the kidneys, and are responsible for producing the symptoms found in patients as outlined below.

Henoch-Schonlein Purpura occurs predominately in children under ten years of age and is most frequently diagnosed in the fall, winter, and spring. Although the exact cause of HSP is not fully understood, certain types of infections, especially those involving the upper respiratory tract, are believed to be possible triggers.

The diagnosis of Henoch-Schonlein Purpura is typically made by the pediatrician and/or the dermatologist. A group of symptoms are often found in patients and can include: gastrointestinal complaints (such as abdominal pain, nausea, vomiting, and bleeding), kidney disease which can present with blood in the urine, joint pains (frequently in the larger joints of the body such as the hips and knees) and a skin rash. The skin rash can take on many appearances, but typically appears as numerous small, red, circular lesions that can be felt with one's fingertip. The rash is often found on the shins and buttocks and occurs in a symmetric distribution. A **biopsy** of the skin can be performed if the diagnosis is not clear by the patient's presenting symptoms and complaints.

Treatment of HSP is based on each individual's symptoms. Typical therapies include rest, hydration, and pain control. Significant joint pains can be treated with anti-inflammatory medicines like ibuprofen. If the rash is severe, or there is significant abdominal pain or kidney involvement, then **oral steroids** may be used.

The prognosis for a patient diagnosed with HSP is excellent. In most cases, the disease is limited and thus does not cause any long-term problems or complications.

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