Schönlein-Henoch Purpura with Severe Duodenal Involvement Treated with Corticosteroids

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A 57-year old woman presented with Schönlein-Henoch purpura and transient glomerulonephritis after streptococcal pharyngitis. Within a week she developed abdominal angina and melena. Endoscopy showed small bowel involvement with severe duodenal inflammation comprising circular erosions and ulceration beyond the ligament of Treitz. To prevent perforation, high doses of Prednisone (60 mg/day) were successfully given. The small bowel lesions resolved within three weeks (Figures 1a and 1b). Prednisone was discontinued after a month and the patient was free of disease six months later.