



ASDP 62nd
Annual Meeting #ASDP25

November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**

Clinicopathologic and direct immunofluorescence features of leukocytoclastic vasculitis in chronic graft-versus-host disease

Yen T.H Le, M.D.^{1,2} Emma F. Johnson, M.D.¹, Eric R. Tkaczyk, M.D., PhD³, Julia S. Lehman, M.D.¹

¹Mayo Clinic, Rochester, MN, ²Vietnam National Hospital of Dermatology and Venereology, ³Vanderbilt University Medical Center



asdp.org

1



ASDP 62nd
Annual Meeting #ASDP25

November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**

Disclosures



asdp.org

- This project is supported by the National Institutes of Health (NIH), under grant **R01 HL169944**, led by Dr. Eric Tkaczyk.
- The presenter has no relevant financial relationships or conflicts of interest to disclose.

#ASDP25

asdp.org

2



ASDP 62nd
Annual Meeting
#ASDP25



November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**



BACKGROUND
asdp.org

- Chronic graft-versus-host disease often happens after allogeneic hematopoietic cell transplantation.
- The skin is the most frequently affected organ
- Common skin manifestations of cGVHD include : sclerotic induration, lichen planus–like lesions, or scaly erythematous patches
- Large-vessel vasculitis is known in cGVHD and can cause serious complications like stroke or paralysis. In contrast, small-vessel vasculitis, especially LCV, is less well understood, with limited data in this context.
- This study explores the possible relationship between leukocytoclastic vasculitis and chronic GVHD, with a focus on histopathologic and immunofluorescence findings.

#ASDP25







3



ASDP 62nd
Annual Meeting
#ASDP25



November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**



METHODS
asdp.org

- With IRB approval, we retrospectively reviewed of 508 cGVHD patients (2000–2025).
- Identified biopsy-confirmed leukocytoclastic vasculitis cases.
- Four patients with cGVHD and LCV were selected.
- Reviewed skin biopsies and clinical data.

#ASDP25







4



ASDP 62nd
Annual Meeting
#ASDP25

November 6-9, 2025
Hilton Baltimore Inner Harbor Baltimore, MD, USA



RESULTS



asdp.org

PATIENT CHARACTERISTICS

- 4 male patients, mean age 64 (range 59–71).
- All had multi-organ cGVHD involvement (gastrointestinal: 3, hepatic: 1, pulmonary: 2, renal: 3)
- 3 patients had skin sclerosis (before-2 or after LCV-1).
- We used the 2014 NIH criteria to classify cGVHD severity: two patients had moderate and two had severe disease

#ASDP25

✕ f @ in

5



ASDP 62nd
Annual Meeting
#ASDP25

November 6-9, 2025
Hilton Baltimore Inner Harbor Baltimore, MD, USA



CLINICAL FINDINGS



asdp.org

- All patients presented with purpura or violaceous macules predominantly on the lower extremities

#ASDP25

✕ f @ in

6



ASDP 62nd
Annual Meeting
#ASDP25

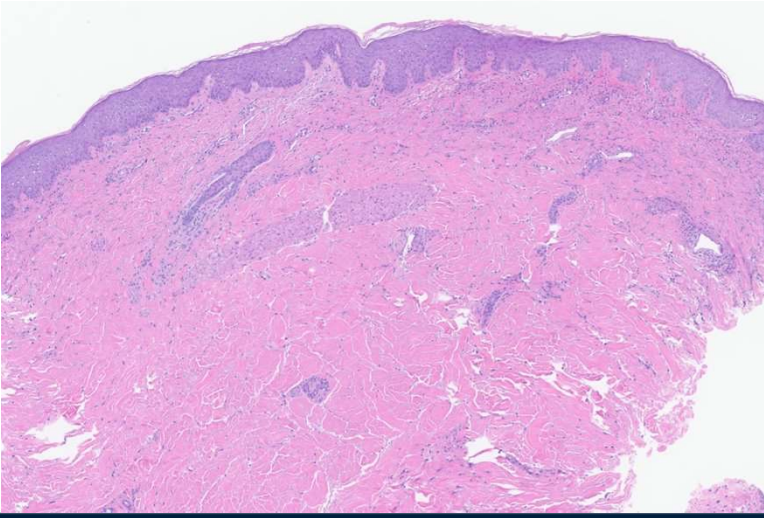


November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**



HISTOPATHOLOGIC FINDINGS
asdp.org

- Histopathology of classic features of LCV including(all patients) : neutrophilic infiltration, leukocytoclasia (nuclear dust), hemorrhage.
- Superficial dermal leukocytoclastic vasculitis and dermal sclerosis (2 patients)



7



ASDP 62nd
Annual Meeting
#ASDP25

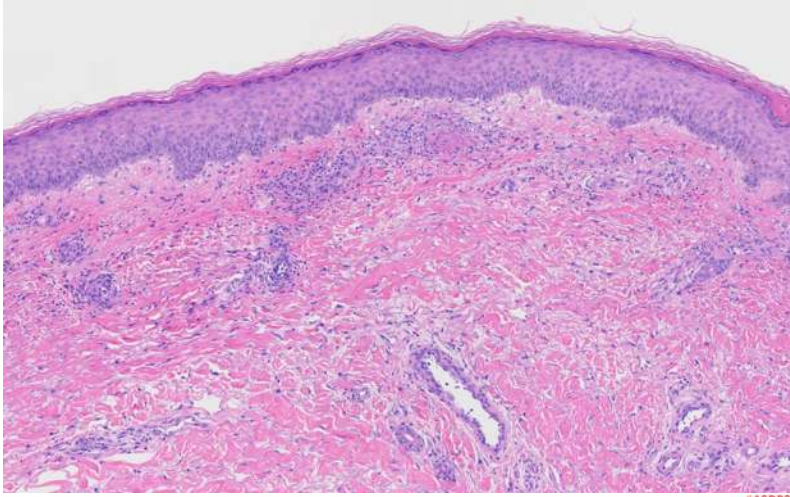


November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**



HISTOPATHOLOGIC FINDINGS
asdp.org

Superficial dermal leukocytoclastic vasculitis and vacuolar interface (one patient)



#ASDP25



8





November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**

DIF AND CRYOGLOBULINS



Direct immunofluorescence:

Granular Vascular Deposition Patterns:

- Vascular IgA: 2 cases
- Vascular IgM and C3: 1 case
- Negative: 1 case
- IgG: Negative in all cases

All patients were seronegative for cryoglobulins and cryofibrinogen

#ASDP25







9





November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**

TRIGGERS



- 3/4 cases developed LCV after tapering or stopping immunosuppressive therapy (4–8 weeks) .
- 1 case triggered by acute kidney injury and discontinued immunosuppressive therapy.
- Infectious causes were excluded. None exhibited systemic or laboratory evidence of renal, neurologic, or gastrointestinal vasculitis.
- None of the patients had active hematologic disease at the time of LCV onset.

#ASDP25







10



November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**



TREATMENT



asdp.org

- All patients were treated with corticosteroids, including three who received systemic therapy (prednisone 0.5–1 mg/kg/day) and one who received topical application.
- Two patients with sclerotic skin involvement received mycophenolate mofetil (MMF, 500–1000 mg twice daily)
- Complete resolution within 2–4 weeks.

#ASDP25







11



November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**



OUTCOMES & FOLLOW-UP



asdp.org

- Mean follow-up: 6 years (range 0.2–12 years).
- One relapse after cyclosporine discontinuation, controlled with MMF.
- No further relapses; cGVHD stable

#ASDP25







12





November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**

CONCLUSIONS: Key Findings



- This case series highlights (LCV) in patients with cGVHD
- LCV often appeared when immunosuppressive therapy was being reduced.
- The course of LCV was generally favorable.
- There are no signs of systemic vasculitis, LCV is limited to the skin.
- LCV can present alongside sclerotic or other cGVHD features.
- DIF findings are non-specific; IgA may be positive or negative.
- Responds well to corticosteroids ± MMF.
- Limitations of this study include the small sample size and retrospective design; Further studies needed

#ASDP25







13





November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**

ACKNOWLEDGMENTS



- Thanks to patients and clinical team.
- I am grateful to my two wonderful mentors for their detailed, careful guidance in helping me carry out this research and report: Dr. Lehman and Dr. Johnson.

#ASDP25







14



ASDP 62nd
Annual Meeting



November 6-9, 2025
Hilton Baltimore Inner Harbor **Baltimore, MD, USA**

THANK YOU FOR YOUR ATTENTION!

QUESTIONS & ANSWERS



The presentation board displays the title "Characterizing Skin Microbiome Diversity Post-OO, Laser and Topical Catecholamine: A Observational Study for Confocal Raman" and lists authors: "Diana E. Hodge, MD, Robert E. Hodge, MD, Robert E. Hodge, MD, Robert E. Hodge, MD, Robert E. Hodge, MD". The board is divided into sections: "Background", "Objectives and Methods", "Results", and "Conclusions". It includes text, tables, and several circular diagrams illustrating microbiome diversity and confocal Raman spectroscopy results.