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Evelyn E. Vanderveen, MD; Roy C. Grekin, MD; Neil A. Swanson, MD; Knud Kragballe, MD, Ann Arbor, Mich
• Compared with normal epidermis, the content of prostaglandin E₂ in basal cell carcinomas of the skin was increased both in vivo and after in vitro incubation. Basal cell carcinomas with an aggressive growth pattern contained the highest amounts of prostaglandin E₂.

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Angela Restrepo, PhD; Jaime Robledo, MD; Iván Gómez, MD; Angela Maria Tabares, MT; Regina Gutiérrez, MT, Medellín, Colombia, South America
• Seventeen patients with cutaneous and lymphangitic sporotrichosis were treated with a new azole derivative, itraconazole. All cleared after three to six months of therapy.

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Suzanne M. Olbricht, MD; Thomas J. Flotte, MD; A. Bernard Collins; Clifford M. Chapman, MS; Terence J. Harrist, MD, Boston
• In each of four cases of dermatitis herpetiformis, immunofluorescent examination revealed IgA1 without IgA2 in the cutaneous deposits. The pathophysiologic significance of this finding is unknown, but suggests that the IgA in the skin of dermatitis herpetiformis patients does not originate in the gut.

The Bone Marrow in Urticaria Pigmentosa and Systemic Mastocytosis: Cell Composition and Mast Cell Density in Relation to Urinary Excretion of Tele-methylimidazoleacetic Acid 422
Börje Ridell, MD; Jon H. Olafsson, MD; Gösta Roupe, MD; Birgitta Swolin, MD; Göran Granerus, MD; Stig Rödger, MD; Lennart Enerbäck, MD, Göteborg, Sweden
• The presence of focal bone marrow lesions containing mast cells, lymphocytes, and eosinophils, together with either increased mast cells in bone marrow sections and/or increased urinary excretion of histamine metabolites, is diagnostic of systemic mastocytosis.

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