

LETTER TO THE EDITOR

In the recent article "An Immunohistochemical Study of the Skin of Healthy Individuals" by E. H. Baart de la Faille-Kuyper, J. B. van der Meer and H. Baart de la Faille, that appeared in vol. 54, 271-274, 1974, the authors report: "Granular deposits of IgM, usually interrupted by negative areas, were found along the epidermal basement membrane zone in 5 of the 23 biopsies examined. In the same cases, as well as in 10 others, conspicuous, finely granular staining was also observed in the walls of papillary capillaries."

The authors interpret these findings as due to an enhanced passage of serum proteins through the endothelium of blood vessels and the occurrence of late-acting C components as being related to physiological mechanisms.

It is the experience of the undersigned during a period of time varying up to 12 years of daily IF practice in the laboratory, that such a conspicuous fluorescence of the dermo-epidermal junction and blood vessel walls has not been noted in non light exposed skin of healthy individuals.

Figs. 2 and 3 in the quoted article probably represent the "fibrillar pseudoband" as reported by T. Burnham. Also the description in the text is that of the fibrillar pseudoband. This phenomena is suggested by one of us (Burnham) to be the result of non-fluorescent spaces below the dermo-epidermal junction caused by edema and or blood vessels.

The implications of the author's interpretations are such that one may question the reliability of IF as a tool in dermatological diagnosis. We think such findings should only be published with properly mentioning the immunological characteristics (e.g. antibody titer and dilution; F/P ratios and specificity) of the antisera used. Moreover it is mandatory in such cases to assay the sera repeatedly for circulating antibodies (ANA and anti-native DNA antibodies) and to follow up the patients longitudinally. One may even question whether the so-called normal cases investigated by the authors are not prone to develop some sort of immune complex disease. In addition it would have been necessary in view of the forementioned implications to have such biopsies checked by other investigators in the field.

This course of events stresses the importance of having cross-investigations and control experiments performed as outlined in the IF manual by Beutner, Nisengard and Hale.

Yours sincerely,

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