

## Case Illustration

# Juvenile Gangrenous Vasculitis of the Scrotum

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A 17-year-old healthy male presented to the emergency room with painful black ulcers on his scrotum that developed acutely over 24-hours. Other symptoms included fatigue, nausea, and vomiting. He had a mild leukocytosis, but was afebrile. He

continued to develop new lesions despite initiation of antibiotics at presentation. Workup was negative for herpes simplex virus (HSV), epstein-barr virus (EBV), human immunodeficiency virus (HIV), and Syphilis. A workup was initiated to rule out underlying vasculitis or vasculopathy, this was also negative. A shave-biopsy of an ulcer edge demonstrated an area of dermal necrosis associated with dense neutrophilic inflammation, hemorrhage, and intravascular thrombosis. A diagnosis of Juvenile Gangrenous Vasculitis of the Scrotum (JGVS) was made. He was treated with oral prednisone and immediately stopped developing new ulcers and showed complete resolution after 6 weeks of therapy (Figure 1).

Figure 1. Black Ulcers on Scrotum



### CONSENT

The authors have received written informed consent from the patient.

### CONFLICTS OF INTEREST

The authors declare that they have no conflicts of interest.

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