

# Letter to the Editor: Morphea, Gluten, and Autoimmunity: HLA Behind the Scenes?

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We read with great attention the recent case report published in the Kansas Journal of Medicine about the peculiar association of morphea, celiac disease, dermatitis herpetiformis, and dermatomyositis in a male adult.<sup>1</sup> We would like to highlight the genetic link between morphea and autoimmune disorders like celiac disease, along with the potent role of human leukocyte antigen (HLA) genes that may lay behind. In fact, numerous case reports in the literature depict similar lesions of morphea, notably in celiac patients with diabetes<sup>2,3</sup> and those individuals share a common pool of HLA alleles.<sup>4</sup>

Several studies investigating autoimmune diseases associated with morphea have identified an increased risk probably linked to a genetic (i.e., HLA) susceptibility.<sup>5,6</sup>

Genetically, several HLA alleles are associated with morphea and also strongly related to celiac disease and dermatomyositis,<sup>7</sup> as well as to other autoimmune conditions like rheumatoid arthritis (HLA DRB1\*04)<sup>8</sup>, multiple sclerosis (HLA DRB1\*15 and HLA DQB1\*06:02)<sup>9</sup>, autoimmune thyroiditis (HLA-DR3)<sup>10,11</sup>, and type 1 diabetes (HLA-DR3-DQ2 and HLA-DR4-DQ8).<sup>12</sup>

The near-future seems promising for a real "genetic card" (e.g., through HLA typing) offered to each patient with autoimmune disorders, and the early detection of all genetic, HLA-related risk is a strong perspective of personalized medicine for early diagnosis and individualized long-term management.

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