

**Reply to
Comment on:
Vasculitis, fibromuscular
dysplasia or hereditary
aneurysms? by Marvisi *et al.***

Sirs,

We have read with great interest the important comment of Betrains *et al.* and we completely agree with their observation. Segmental arterial mediolysis (SAM) is also an important mimicker of large- and medium-vessel vasculitis and this condition should be considered in our patient in the differential diagnosis along with fibromuscular dysplasia (FMD) and hereditary aneurysm formation. SAM is an unusual noninflammatory, non-atherosclerotic disorder with a predilection for the medium-sized abdominal arteries. FMD and SAM have radiological similarities and clinically it can be difficult to distinguish between these two conditions, even if the age of onset, sex, distribution of the affected arteries and clinical symptoms

may help in the diagnostic orientation (1). Recently, involvement of coronary arteries was reported in some cases of SAM (2). Therefore, SAM should be included in the list of differential diagnoses in our case. We once again emphasise the importance of considering non-inflammatory arteriopathies in patients with suspected vasculitis to avoid useless and dangerous long-term immunosuppressive therapies.

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