

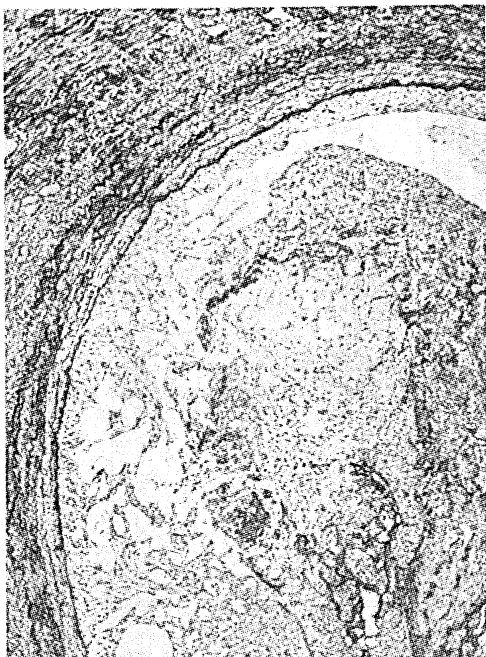
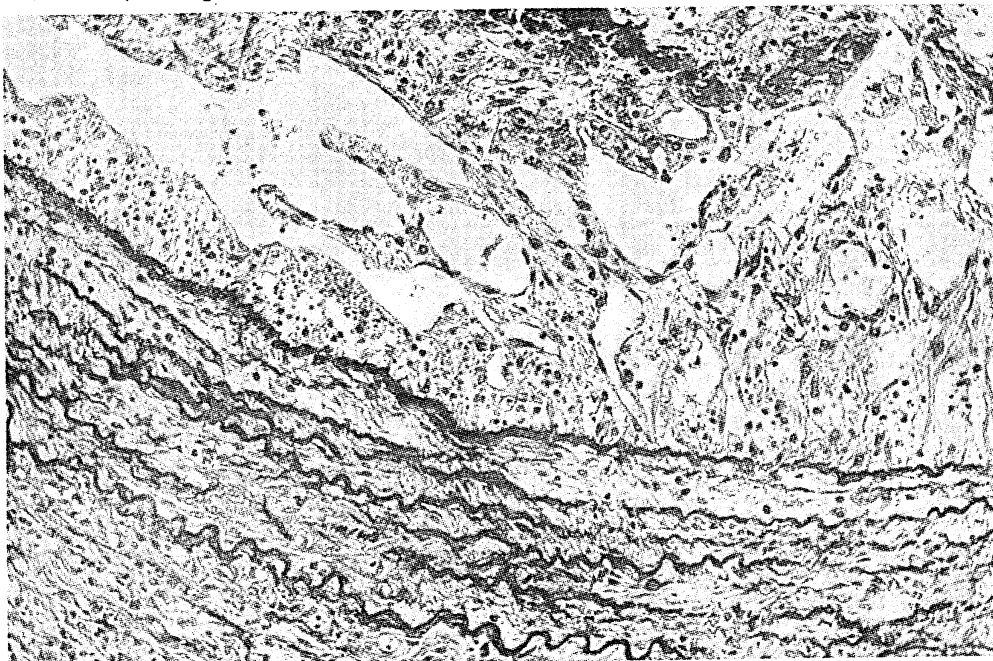


Fig 5.—Pulmonary artery branch. Intimal thickening above. Left center, papillary proliferation of endothelial cells. Dark streaks and masses in center and to right, fresh thrombus formation (AFIP Neg 69-4034; Movat, reduced from $\times 45$).

Fig 6.—Higher magnification of portion of Fig 5. Intimal thickening on left above internal elastica. Endothelial papillations center and right. Darker material in upper field represents recent thrombus formation (AFIP Neg 69-4035; Movat, reduced from $\times 135$).



responsible for most of the encroachment on the vascular lumens.

Beneath the thrombi, the intima was often thickened by fibrous tissue, and the media showed thickening or thinning, with fibrosis and disruption of the muscular, elastic, and fibrous components. The elastica in these areas was variously thickened, fragmented, duplicated, or absent. AMP-positive material was usually present in the organized basilar portions of the thrombi and also in the underlying intima and media. Digestion with hyaluronidase removed most of this AMP material.

As judged by the degree of vascularization and collagenization, as well as by the presence of hemosiderin-laden macrophages, the basilar portions of the thrombi were estimated to be of at least a week's duration, and probably longer. There was no evidence in any patient of underlying atherosclerosis, and in only one instance was an acute inflammatory reaction noted in the wall of the blood vessel or in the adventitia.