

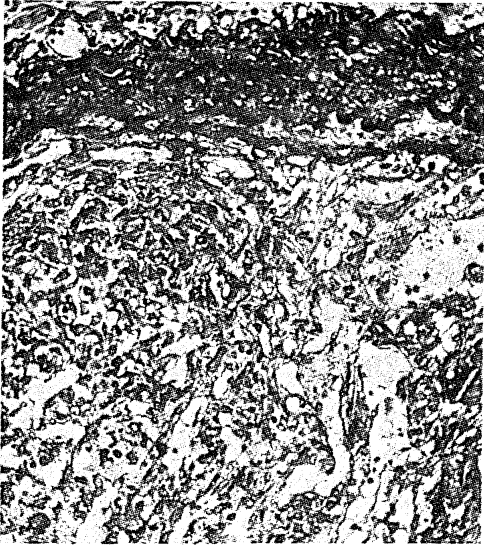


Fig 7.—Pulmonary artery branch. Endothelial proliferation, lower two thirds. Thrombus formation, lower right (AFIP Neg 69-3717; Movat, reduced from $\times 115$).



Fig 8.—Small pulmonary artery branch. Intimal thickening, upper and lower portions of vessel. Endothelial proliferation in upper portion (AFIP Neg 69-3438; hematoxylin and eosin, reduced from $\times 180$).



Fig 9.—Small pulmonary artery branch. Above, focal fibrous thickening of intima, media, and adventitia. Internal elastica not demonstrable in this fibrous area (AFIP Neg 69-1630; Movat, reduced from $\times 145$).

The second type of vascular lesion was found in smaller pulmonary vessels and consisted of endothelial and intimal proliferation characterized by formation of slender to broad papillary projections (Fig 5 to 8). These projections often formed anastomosing plexiform networks that in some instances almost filled the lumen of the vessel. Recent thrombi were sometimes found in association with this type

of change. The intima beneath the endothelial proliferation was often thickened, and hyaluronidase-sensitive, AMP-positive material was present in the interstices. The underlying media and adventitia were unaltered.

The third type of lesion was found in only one patient, in a small branch of the pulmonary artery. It consisted of a focal nodular, fibrous thickening of the intima, media, and adventitia, with no associated endothelial proliferation or thrombosis (Fig 9).

Other Tissues.—Sections of one or both ovaries were available from nine patients. Corpora lutea were absent in all instances. Multiple cystic graafian follicles were noted in the ovaries of one patient, but the theca interna was not well developed, and there was no luteinization. The paucity of developing graafian follicles and absence of corpora lutea made the cortical and medullary stroma appear relatively more prominent than usual for women in this age group, but there was no evidence of actual stromal hyperplasia.

Clear-cut decidual transformation of the endometrial stroma, together with inactive-appearing endometrial glands, was found in two patients. Similar changes were probably present in four others but were obscured by the degree of postmortem autolysis. The endometrium was in