



We thank those who reviewed manuscripts submitted to the *Cleveland Clinic Journal of Medicine* for the year ending September 30, 1998. Reviewing papers for scientific journals is an arduous task and involves considerable time and effort. We are grateful to these reviewers for contributing their expertise this past year.—*John D. Clough, MD, Editor-in-Chief.*

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serum complement level,<sup>12</sup> a finding typical of active SLE. This case also illustrates the nonspecificity of vascular inflammation in a biopsy specimen. Although this patient's rash (deemed leukocytoclastic vasculitis) could have reflected another disease process, similar rashes can occur in atheroembolic disease.<sup>13</sup>

This case illustrates how the pathway to the diagnosis of vasculitis can indeed be treacherous; and seldom in medicine is the admonition *primum non nocere*—first, do no harm—more applicable.

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