

ACR Criteria for the Classification of Polyarteritis Nodosa (PAN), 1990

- Weight loss > 4 kg: Loss of >4 kg body weight since illness began, not related to dieting or other factors.
- Livedo reticularis: Mottled reticular pattern over the skin of portions of the extremities or torso.
- Testicular pain/tenderness: Pain or tenderness of the testicles, not due to infection, trauma or other causes.
- Myalgias, weakness or leg tenderness: Diffuse myalgias (excluding shoulder or hip girdle) or weakness of muscles or tenderness of leg muscles.
- Mono- or polyneuropathy: Development of mononeuropathy, multiple mononeuropathies or polyneuropathy.
- Diastolic BP >90 mmHg: Development of hypertension with the diastolic BP higher than 90 mmHg.
- Elevated BUN or creatinine: Elevation of BUN >40 mg/dl or creatinine >1.5 mg/dl, not due to dehydration or obstruction.
- Hepatitis B virus: Presence of hepatitis B surface antigen or antibody in serum.
- Arteriographic abnormality: Arteriogram showing aneurysms or occlusions of the visceral arteries, not due to arteriosclerosis, fibromuscular dysplasia or other non-inflammatory causes.
- Biopsy of small or medium-sized artery containing polymorphonuclear cells: Histologic changes showing the presence of granulocytes or granulocytes and mononuclear leucocytes in the artery wall.

Classified as PAN if at least three of ten criteria are present

