Dr. Butendieck, *et al*, reply

We read with great interest the response of Dr. Besse, *et al*¹, to our letter, “Unusual presentation of giant cell arteritis in 2 patients: uterine involvement,” published in *The Journal of Rheumatology*². We are glad that the authors shared their experience in identifying systemic disease with the use of positron emission tomography/computed tomography after finding localized involvement on histopathology from adnexectomy. As additional cases are published, we hope that the recognition of gynecologic giant cell arteritis (GCA) and other more unusual presentations of GCA with systemic involvement will continue to increase.

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REFERENCES

1. Besse MC, Collescandy N, Diot E. Gynecologic vasculitis: positron emission tomography–computed tomography contribution in a rare localization of giant cell arteritis [letter]. *J Rheumatol* 2019;46:439.
2. Butendieck RR, Abril A, Cortese C. Unusual presentation of giant cell arteritis in 2 patients: uterine involvement [letter]. *J Rheumatol* 2018;45:1201-3.

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