

Pt. Name:	محمد يحيى مجاهد القهالي	Lab Number:	1721-2026
Pt. Age:	75 years.	Gender:	Male
Received date:		Reported date:	2026-03-29
Referred By:	د/ حمزة الحديفي		

PATHOLOGY REPORT

Clinical Information.	Enterocutaneous fistula and ileostomy presenting with melena and multiple distal ileal ulcers.
Nature of specimen.	Endoscopic biopsies.

GROSS:

Soft tissue fragments collectively measured 1 cm, totally embedded.

MICROSCOPIC:

Sections of the ileal mucosa demonstrate nearly diffuse, moderate villous atrophy characterized by significantly blunted and partially flattened villi, accompanied by compensatory crypt hyperplasia and a pathological increase in intraepithelial lymphocytes. No specific granulomas are identified. Additionally, there are areas of extensive mucosal ulceration and chronic active inflammation. No evidence of specific granulomas. No evidence of atypia or malignancy.

DIAGNOSIS:

Ileal endoscopic biopsy:

- Active inflammatory ulceration, suggestive of Crohn's disease (see comment).
- Negative for malignancy.

COMMENT:

Active inflammatory ulceration with associated enterocutaneous fistula raises suspicion of transmural involvement. Correlation with endoscopic findings (cobblestoning, skip lesions, strictures with preserved intervening mucosa), elevated fecal calprotectin, and ASCA serology confirms fistulizing Crohn's disease."

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
29-03-2026

Nerveen Tahoun