

Pt. Name:	صفية محمد هادي محمد	Lab Number:	5968-2025
Pt. Age:	25 years.	Gender:	Female
Received date:		Reported date:	2025-12-29
Referred By:	د/ محمد الحميدي	Reported date:	2026-01-02

## PATHOLOGY REPORT

Clinical Information.	Severe pangastritis exhibiting a nodular mucosal pattern, with the presence of a small sessile polyp in the distal gastric body.
Nature of specimen.	Excisional Biopsy with gastric polypectomy.

### GROSS:

Two samples were submitted:

- Gastric endoscopic biopsy: Two soft tissue fragments collectively measured 0.4 cm, totally embedded.
- Polyp at distal gastric body area: Soft tissue fragments collectively measured 0.6 cm, totally embedded.

### MICROSCOPIC:

- Gastric mucosa showing moderate atrophy of glands and moderate infiltration by lymphocytes and plasma cells. Some neutrophils are seen infiltrating glands thus indicating activity. H. pylori characteristic forms are seen colonizing glands. No evidence of intestinal metaplasia, atypia or malignancy. Since cytotoxin-producing H. pylori are capable of inducing complications, their serological detection is recommended.
- A polypoid lesion composed of hyperplastic tubular glands with related dense inflammatory infiltration by neutrophils, lymphocytes, plasma cells and histiocytes. Some foci show crowded glands and lined by cells with hyperchromatic nuclei, indicating high grade dysplasia. No evidence of frank malignancy.

### DIAGNOSIS:

#### Stomach, endoscopic biopsy and polypectomy:

- Adenomatous polyp with focal high grade dysplasia.
- H. pylori-associated moderate chronic atrophic gastritis with associated activity.
- Negative for frank malignancy.

### COMMENT:

Follow up endoscopy and biopsy after treatment of inflammatory activity is recommended to ensure reversal of the reparative dysplastic changes.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD  
02-01-2026

Nereen Tahoun

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