

Pt. Name:	إبراهيم محمد يحيى أحمد حسن		Lab Number:	0976-2026	
Pt. Age:	16 years.	Gender:	Male	Received date:	2026-02-11
Referred By:	د/ عقيل الشامي		Reported date:	2026-02-13	

PATHOLOGY REPORT

Clinical Information.	Epigastric pain, chronic diarrhea, multiple terminal nodules???
Nature of specimen.	Endoscopic biopsies

GROSS:

Four biopsies were received :

- 1- Gastric biopsy : soft tissue fragments collectively measured 0.9 cm, totally embedded.
- 2- Esophageal biopsy: soft tissue fragments collectively measured 0.8 cm, totally embedded.
- 3- Terminal ileum biopsy : soft tissue fragments collectively measured 0.9 cm, totally embedded.
- 4- Colonic biopsy : soft tissue fragments collectively measured 1.3 cm, totally embedded.

MICROSCOPIC:

- 1- Superficial esophageal mucosal fragments with prominent intraepithelial eosinophilia, greatest in the superficial and mid-epithelial layers. Peak counts show multiple foci with >15 eosinophils per high-power field (HPF, 400 \times), with occasional eosinophil microabscesses (clusters of >4 eosinophils). There is associated basal cell hyperplasia with expansion of the basal layer, focal elongation of papillae into the upper third of the epithelium, and spongiosis (intercellular edema). Surface epithelial sloughing and scattered degranulated eosinophils are noted. No evidence of atypia or malignancy.
- 2- Gastric mucosa showing moderate infiltration by lymphocytes and plasma cells. Lymphocytes aggregate in some foci to form lymphoid follicles with active germinal centers. Neutrophils are seen infiltrating glands thus indicating activity. H. pylori characteristic forms are present. There is no evidence of intestinal metaplasia, atypia or malignancy.
- 3- Ileal mucosa showing moderate infiltration by lymphocytes and plasma cells. Lymphocytes aggregate in some foci to form lymphoid follicles with active germinal centers. Villi are intact and are negative for atrophy and ulceration. No evidence of specific granulomas. No evidence of malignancy.
- 4- Intact colonic mucosa with mild reduction in the number of mucigenic cells and mild infiltration by lymphocytes, plasma cells and neutrophils. However, crypt abscesses are not identified. No evidence of atypical or malignant cells.

DIAGNOSIS:

1- Esophagus, Endoscopic biopsies:

- Eosinophilic esophagitis. Negative for malignancy.

2- Stomach, Endoscopic biopsies:

- H. pylori associated marked chronic follicular gastritis with moderate inflammatory activity.
- Negative for intestinal metaplasia, dysplasia or malignancy.

3- Terminal ileum, Endoscopic biopsies:

- Moderate chronic non-specific ileitis.
- Negative for malignancy.

4- Colon, Endoscopic biopsies:

- Mild chronic colitis with minimal inflammatory activity.
- Negative for epithelial dysplasia. Negative for malignancy.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
13-02-2026

Nerveen Tahoun

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