

Klaikaew N

## Case 1

A 53-year-old male presented with low grade fever, dyspepsia and significant weight loss for 3 months. Physical examination revealed hepatosplenomegaly. His liver enzymes were mark elevated. Anti-HIV test was positive. Liver biopsy was performed and reveals vague granulomatous lesion composed of aggregation of histiocytes with numerous acid fast organisms.

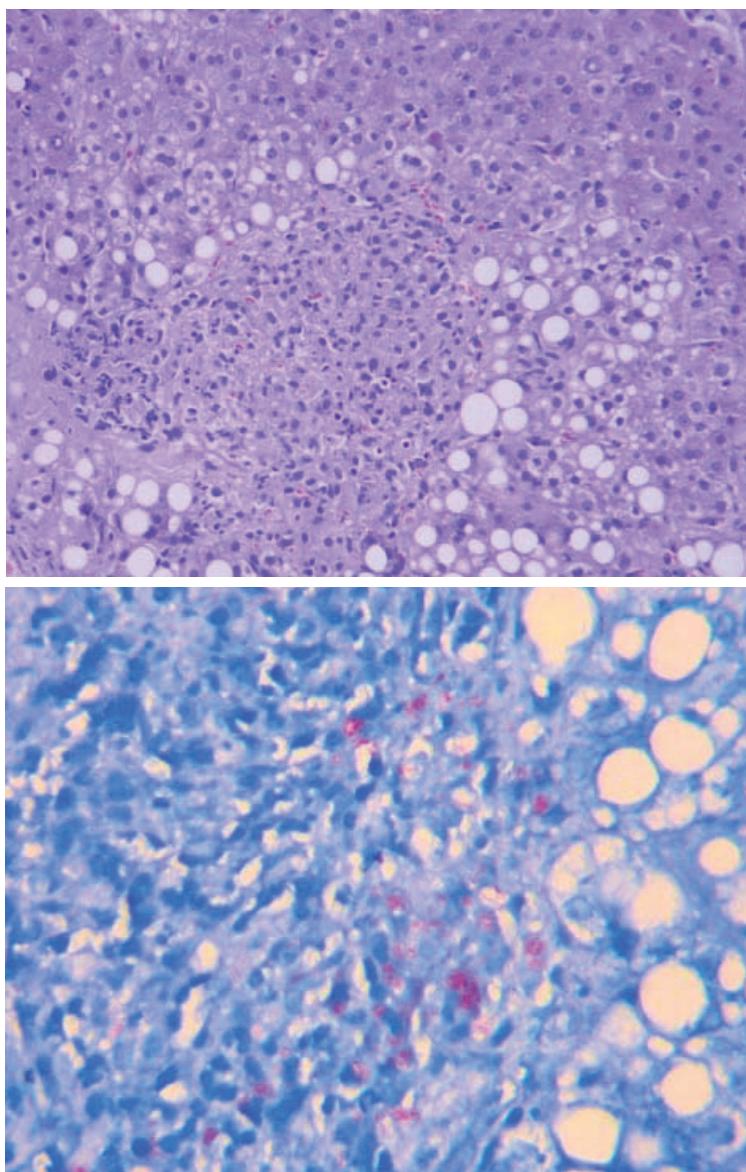


Figure 1.

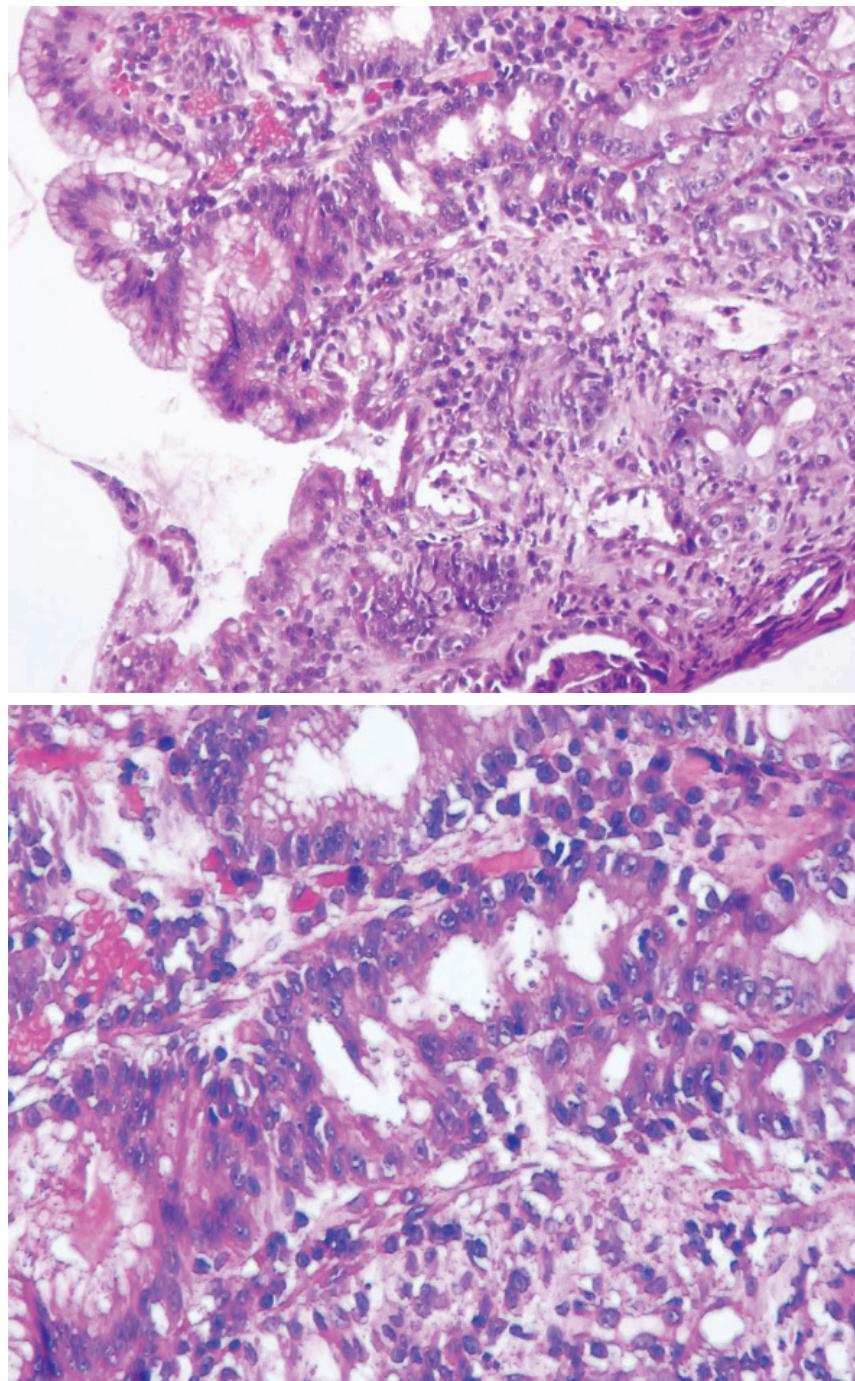
**What is the most likely diagnosis?**

(Answer see page 41)

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**Case 2**

A 38-year-old HIV male presented with chronic watery diarrhea and significant weight loss for 1 year. Physical examination was normal. EGD was performed and revealed normal mucosa. Duodenal juice aspiration and biopsy was obtained. Histological report showed inflamed duodenal mucosa with small round organisms in crypt lumen.



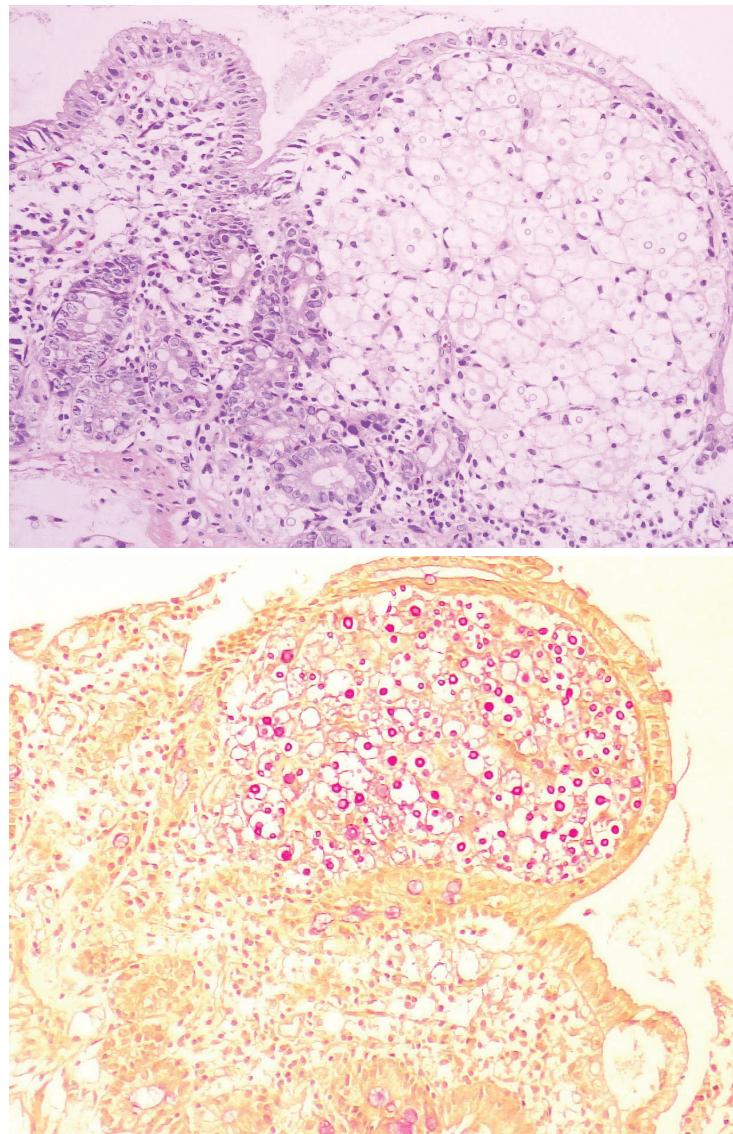
**Figure 2.**

**What is the most likely diagnosis ?**

(Answer see page 41)

**Case 3**

A 40-year-old male presented with chronic watery diarrhea and generalized edema for 12 months. Anti-HIV was positive. Stool examinations revealed no WBC or parasites. Stool for AFB were also negative. An EGD with random biopsy was revealed diffuse flat villi and scalloping appearance of duodenum. The biopsy was done histopathology showed widening of duodenal villi with clear zone composed of large round organisms with thick capsule. These organisms have positive mucin stain.

**Figure 3.**

**What is the most likely diagnosis?**

(Answer see page 41)

**Answer for patho corner**

Case 1 = Mycobacterium Avium Complex infection

Case 2 = Cryptosporidiosis infection

Case 3 = Cryptococcosis infection