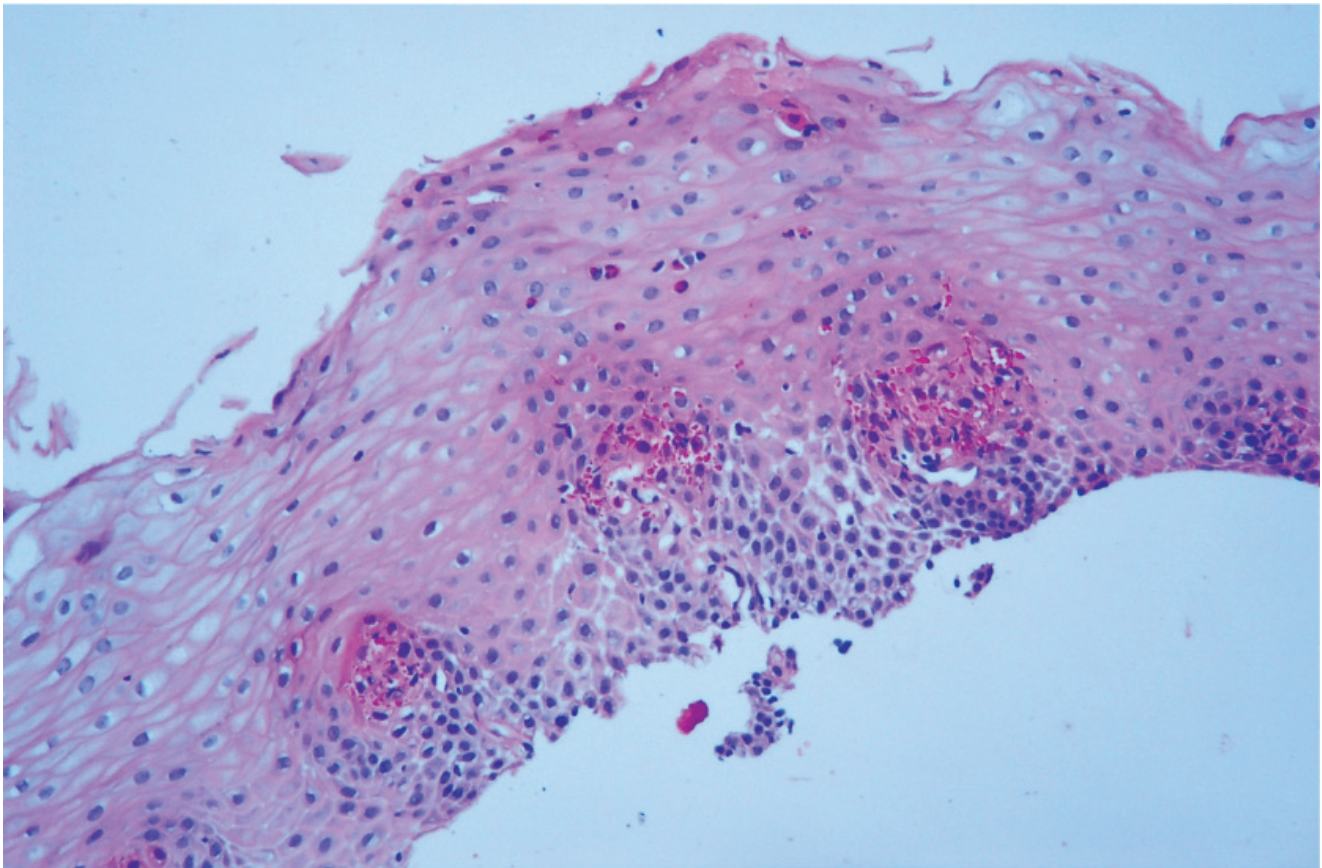


Case 1

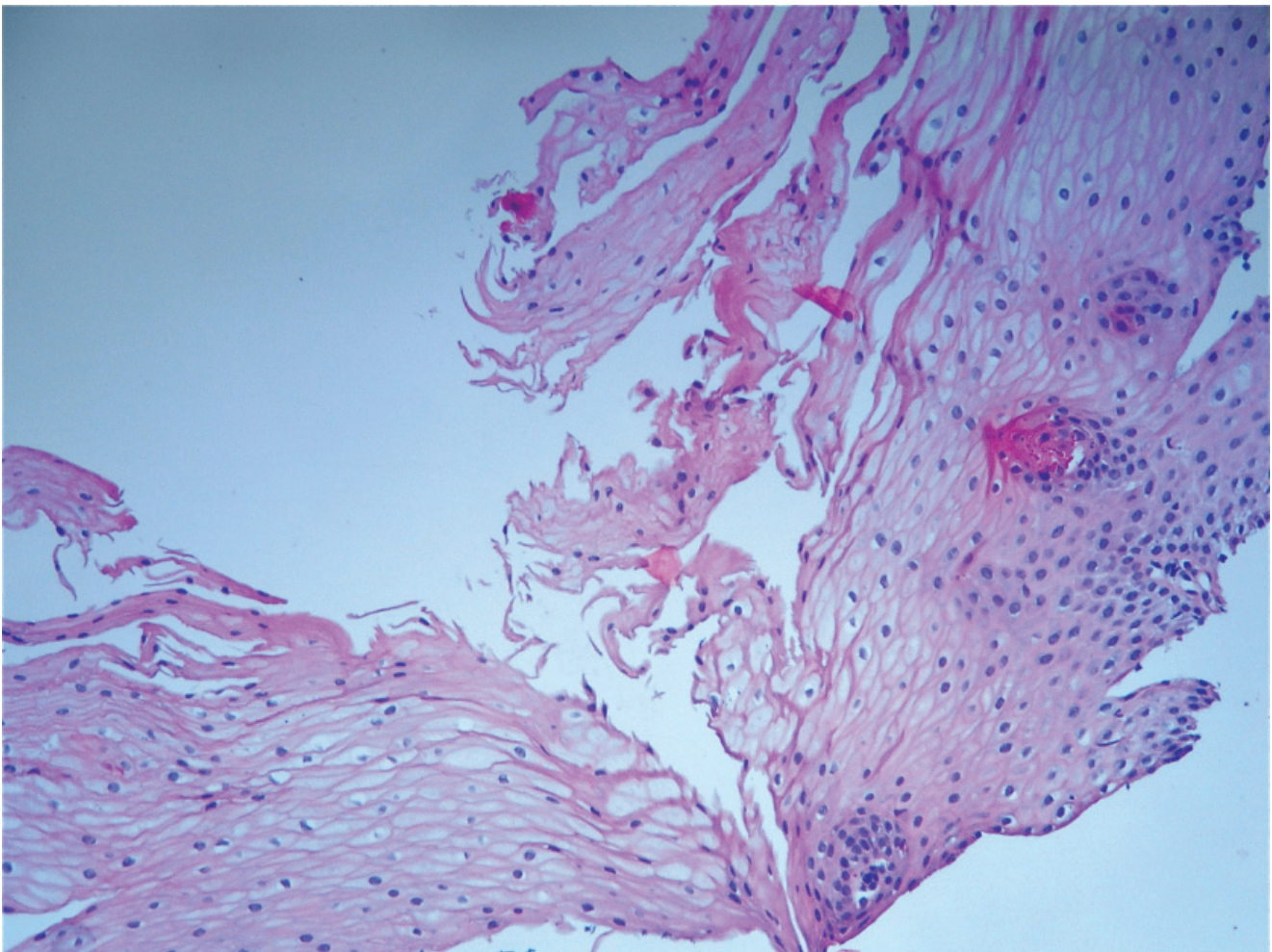
A 44-year-old man presented with chronic heartburn. EGD was done. His EGD finding revealed small esophageal erosions at distal esophagus with hiatal hernia. The biopsy from distal esophagus exhibits dilated intercellular spaces. The squamous cells are separated by clear linear spaces and patchy eosinophilic infiltration (5-7 cells/HPF). Elongation of papillae and basal zone hyperplasia are also noted.



What is the most likely diagnosis?

Case 2

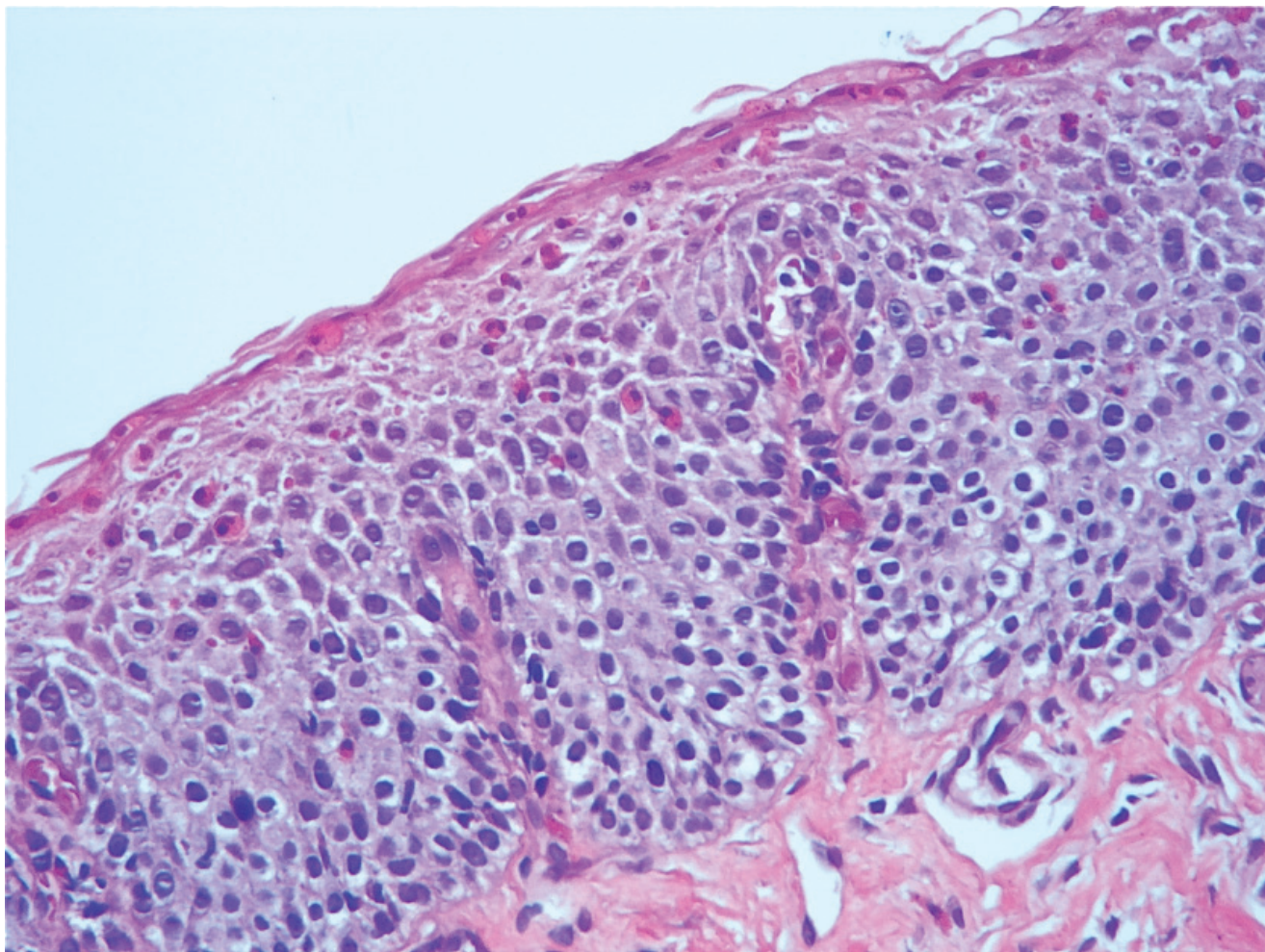
A 58-year-old male with dyspepsia underwent an EGD. Esophagoscopy revealed multiple, flat, grey white, oval shape lesions varying in size scattered in the distal esophagus. Biopsy from distal portion of esophagus demonstrates nodular lesion composed of enlarged squamous epithelial cells containing abundant pale eosinophilic cytoplasm. Neither organism nor inflammatory cell infiltration is seen.



What is the most likely diagnosis?

Case 3

A 56-year-old female presented with a persistent cough since 5 years. She was put on steroid asthma medication and felt some better but still cough. EGD was done with biopsy. The biopsy from proximal esophagus reveals marked intraepithelial eosinophilic infiltration (>20 cells/HPF). Focal degranulation of eosinophils and eosinophilic microabscess at surface.



What is the most likely diagnosis?

1. Answer: Reflux esophagitis
2. Answer: Glycogenic acanthosis
3. Answer: Eosinophilic esophagitis