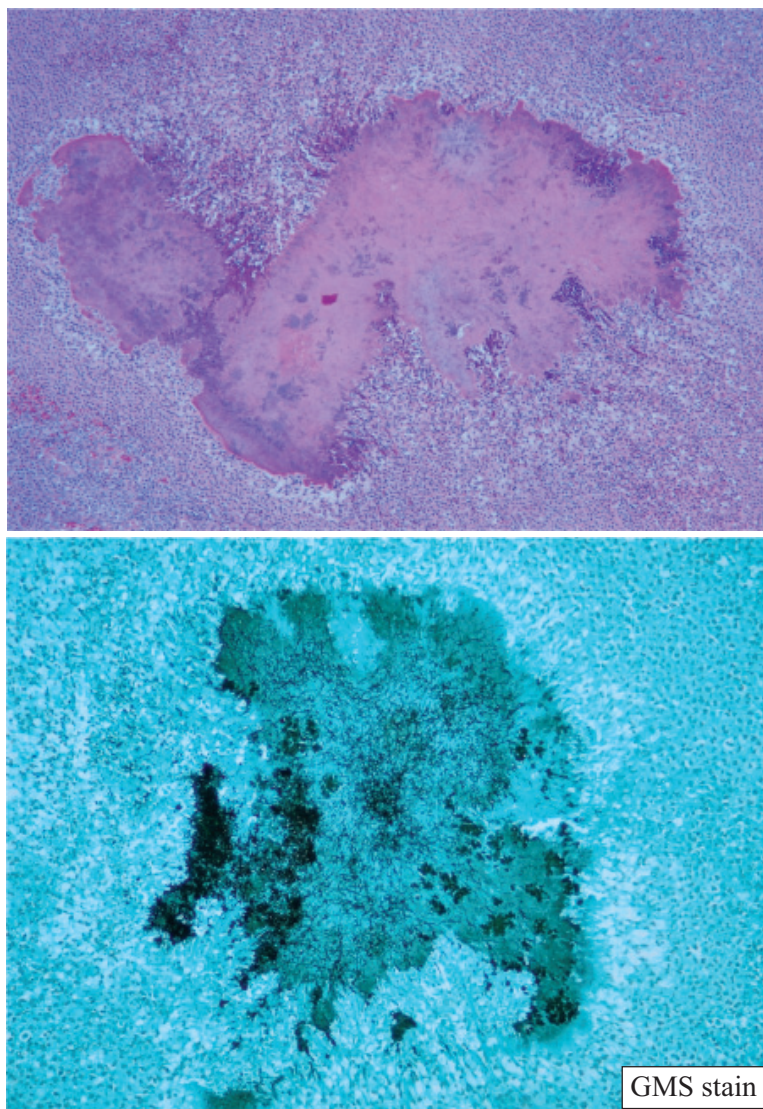


*Klaikaew N***Case 1**

A 65-year-old diabetic woman presented with fever and right lower abdominal pain. The appendectomy was operated and section was taken from the area of periappendiceal abscess. The pathological reported suppurative inflammatory reaction, with formation of abscesses that contain one or more granules of organized aggregation of filamentous organism, which are bordered by eosinophilic material. The granules are composed of delicate, branched, gram-positive filaments haphazardly arranged in an amorphous matrix of uncertain composition. GMS staining is a useful method for demonstrating these filamentous organisms.



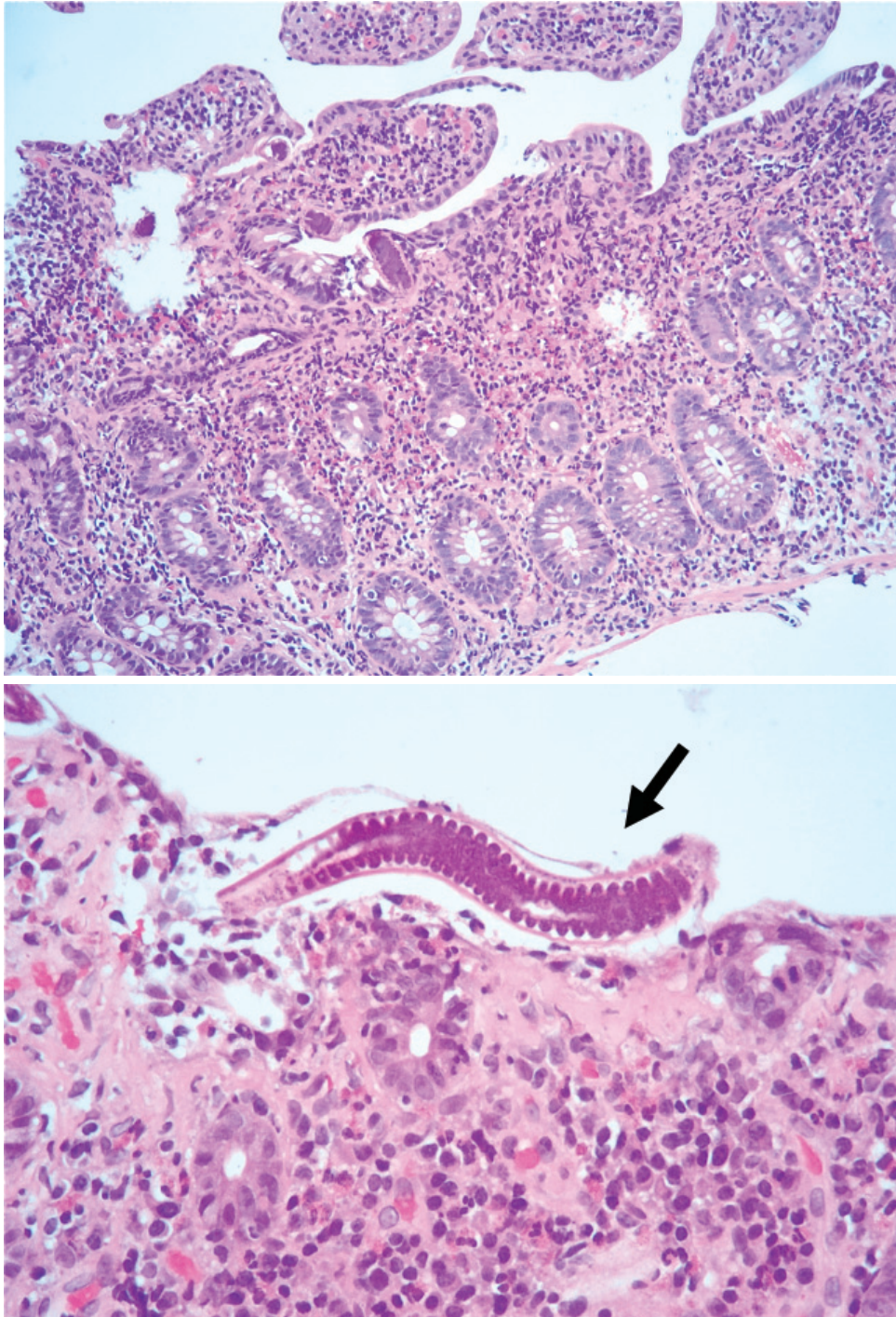
What is the most likely diagnosis?  
(Answer see page 184)

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Klaikaew N, *et al.*

## Case 2

A 25 years old male presented with bowel habit change and legs edema. A colonoscopy was performed and found multiple small ulcers in terminal ileum. The biopsies were done and reported ulcerative ileal mucosa with increased lymphoplasmacytic and densely eosinophilic infiltration in the lamina propria. There are scattered parasites with stichosome at crypts.

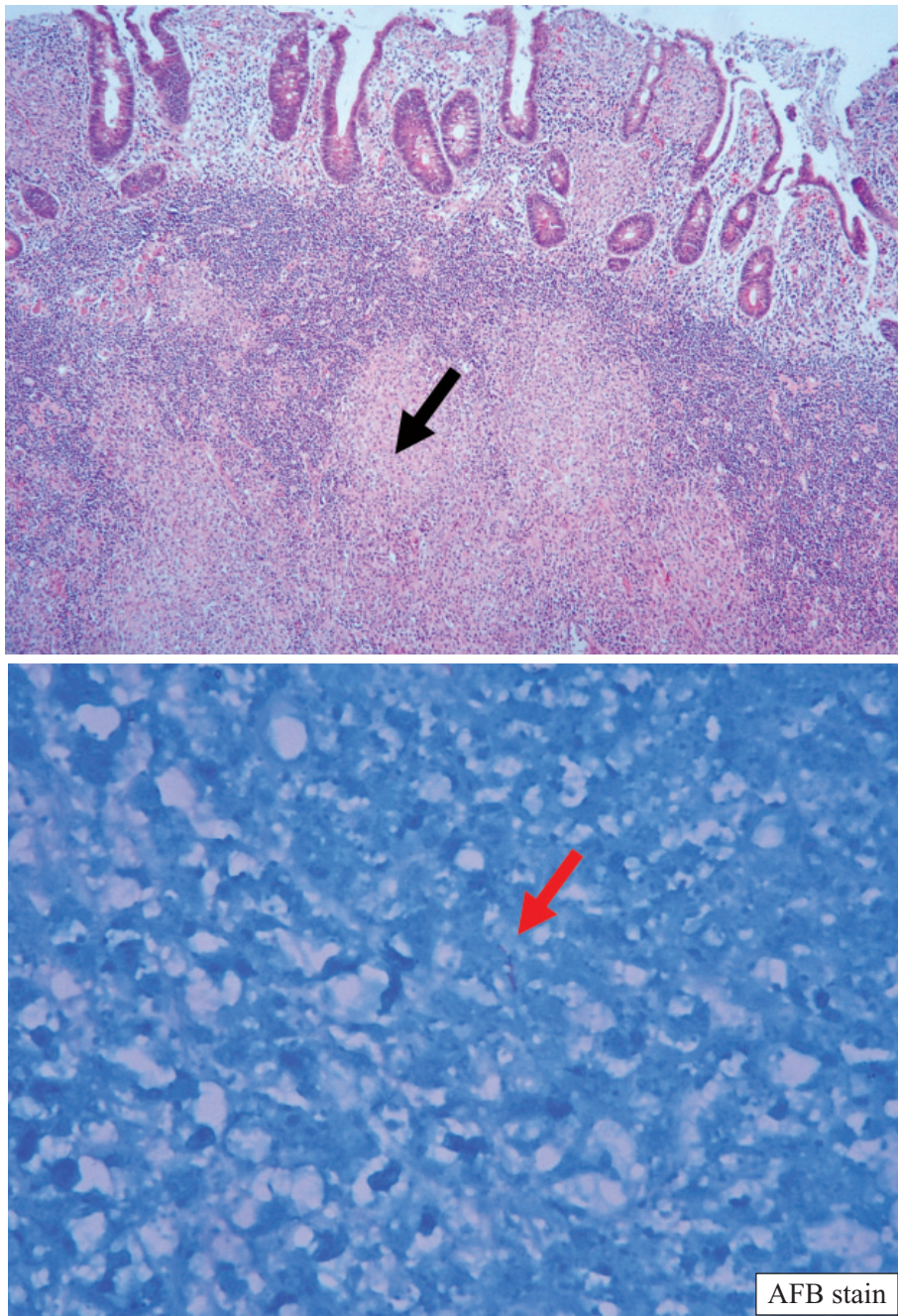


What is the most likely diagnosis?  
(Answer see page 184)



### Case 3

A 36-year-old female with an underlying of HIV infection presented with chronic diarrhea. Her CD4 count was 19/mm<sup>3</sup>. A colonoscopic finding showed multiple clean base ulcers with nodularity of ileal mucosa. Biopsy was performed and revealed ileal ulcer with caseous and non caseous granulomatous lesions containing scattered acid fast bacilli.



What is the most likely diagnosis?  
(Answer see page 184)

#### Answer for patho corner

- Case 1 = Appendiceal abscess with actinomycetes
- Case 2 = Ulcerative ileitis with capillariasis
- Case 3 = Tuberculosis of ileum