CONTINUING MEDICAL EDUCATION ΣΥΝΕΧΙΖΟΜΕΝΗ ΙΑΤΡΙΚΗ ΕΚΠΑΙΔΕΥΣΗ

Gastroenterology-Endoscopy Quiz – Case 8

A 40-year-old renal transplant recipient, with a five-month history of afebrile diarrhoea and moderate anemia, was referred for evaluation with wireless capsule endoscopy. Upper and lower gastrointestinal tract endoscopy with biopsies performed one month before were normal and no laboratory signs of infection (increased WBC and CRP) were present. Capsule endoscopy revealed erythema, edema, erosions and ulcers in discrete parts of the jejunum (figures 1, 2, 3). A tissue diagnosis of specific enteritis was subsequently made by means of push enteroscopy with biopsies. The patient was treated with appropriate treatment and bowel habits returned to normal.

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S. Karagiannis,¹

C. Liatsos,¹

P. Bobotsi,²

D. Psilopoulos,¹

C. Mavrogiannis¹

¹Department of Gastroenterology, Faculty of Nursing, University of Athens, "Helena Venizelou" General Hospital of Athens, Athens

²First Department of Internal Medicine, National and Kapodistrian University of Athens, "Laikon" Hospital, Athens, Greece







Figure 1

Figure 2

Figure 3

Comment

Although CMV enteritis is an uncommon infection among the general population, it should be considered in the differential diagnosis of immunosuppressed patients with unexplained diarrhoea.

Corresponding author

P. Bobotsi, First Department of Internal Medicine, National and Kapodistrian University of Athens, "Laiko" Hospital, 17 Mikras Asias street, GR-115 27 Athens, Greece e-mail: nbobotsi@freemail.gr e-mail: natalia.vallianou@hotmail.com