

CASE 10

CLINICAL HISTORY

A 67 year-old Caucasian male, heterosexual.

PMH: hypertension and pan-colitis (last year diagnosis)

Admitted with shortness of breath and fainting after climbing stairs

Tests: deranged liver function, anaemia, lymphopaenia (0.5)

Hypotensive after fluid infusion

CXR: infiltrates ?oedema ?bacterial pneumonia

Do not resolve with antibiotics

HIV test +ve

Transferred to HDU, but cardiac arrest same day

Treated with Septrin and other agents

HAART started

Died 6 days post-arrest with multi-organ failure.

SUMMARY OF AUTOPSY FINDINGS

Ht 154cm, Wt 80: BMI = 33.7

Jaundiced; pitting oedema – whole body

Liver 2125g; yellow, fatty, ?micronodular cirrhosis

Peritoneum – 250ml brown ascites

Pancreas: oedema, haemorrhage, necrosis; local fat necrosis with white nodules

Lungs: congestion only

SECTIONS SUBMITTED

Liver, lung, pancreas, transverse colon

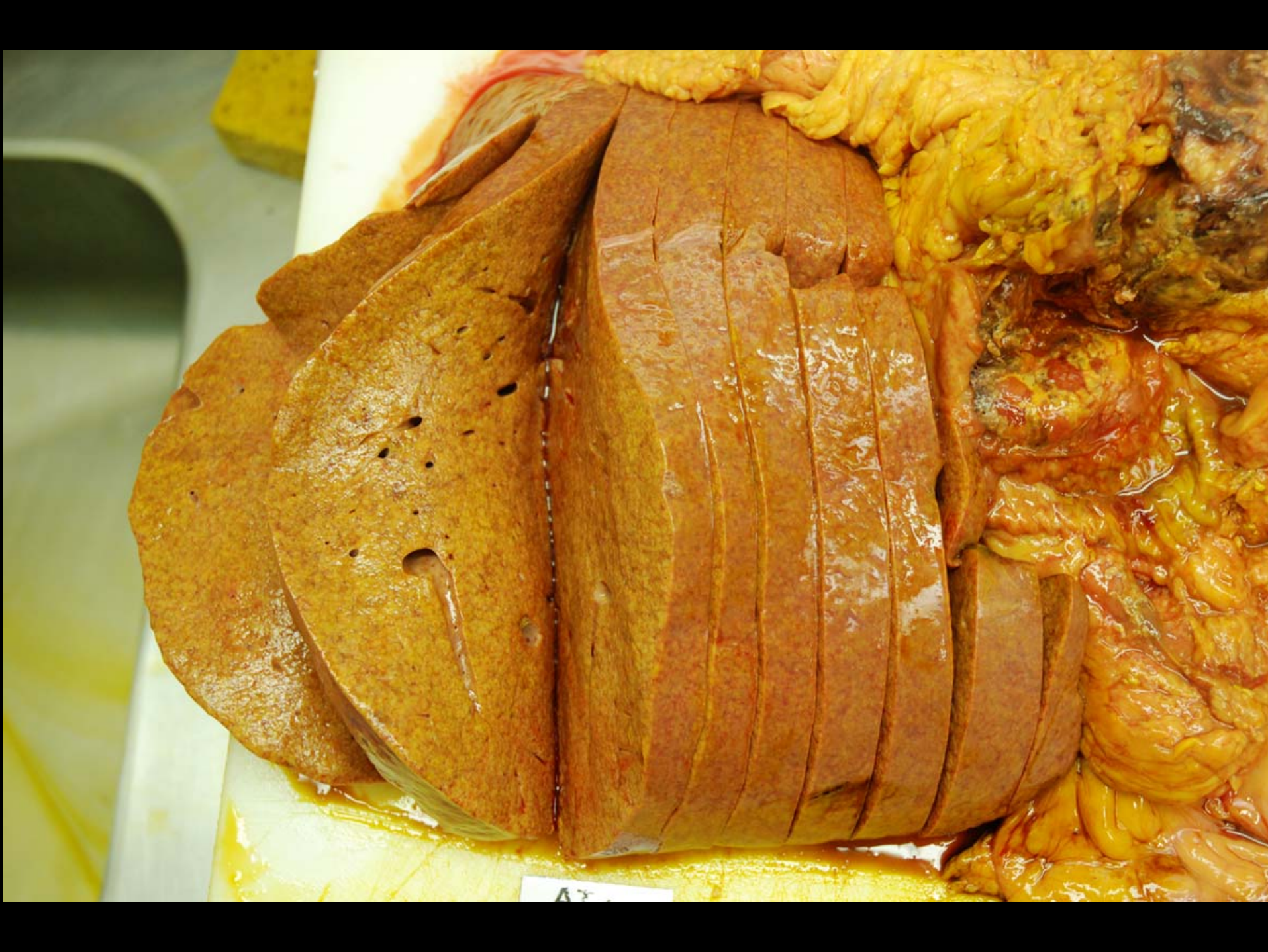
QUESTIONS

1. What does the liver show?
2. How old is the pancreatic lesion?
3. Does he have pan-colitis?
4. What pathologies in the lung are you looking for?
5. Is there one overarching diagnosis, or several?









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