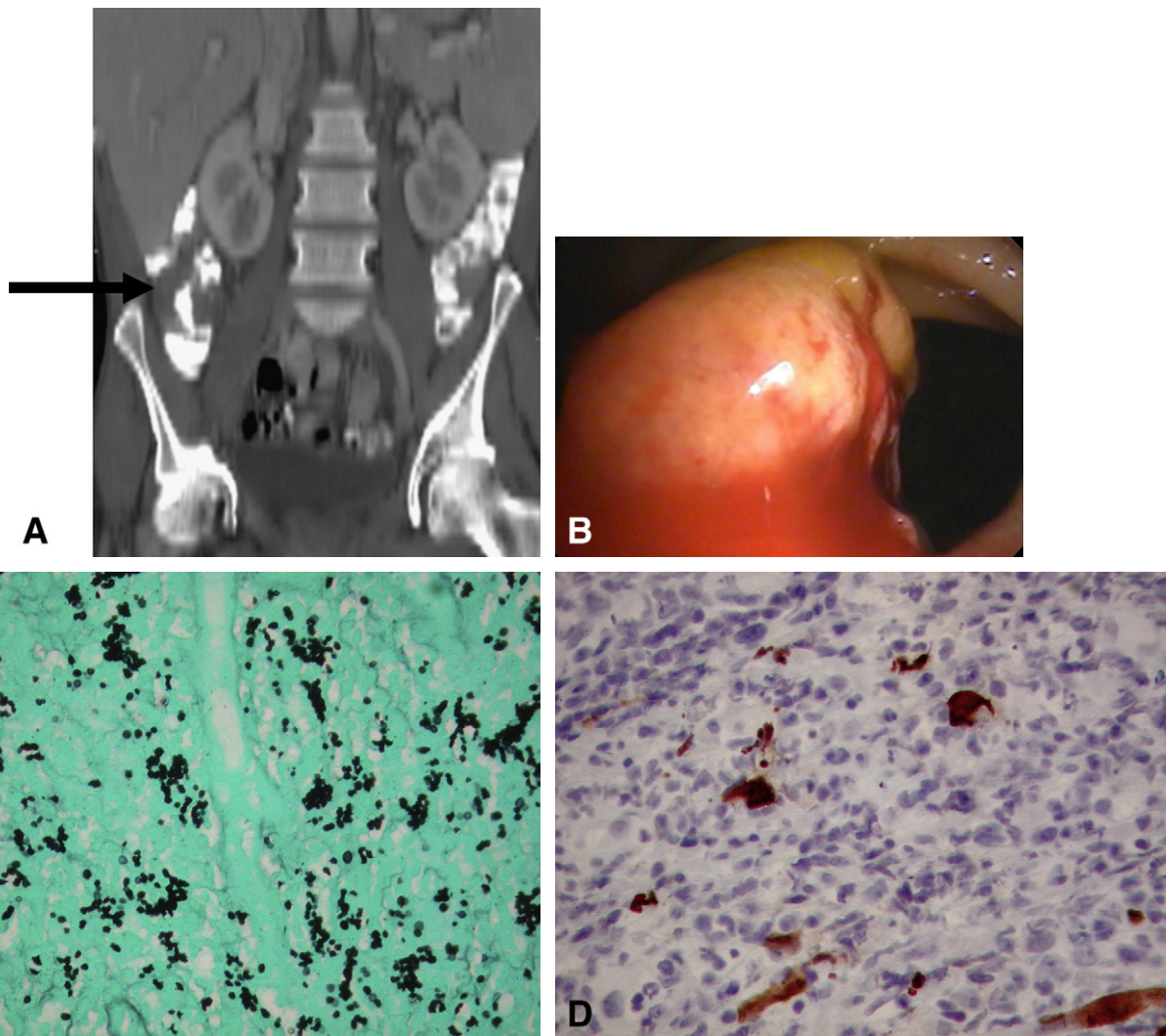


Colonic coinfection of histoplasma and cytomegalovirus mimicking carcinoma in a patient with HIV/AIDS



A 45-year-old man with a known history of hemophilia and AIDS presented with right upper quadrant pain for 3 weeks, associated with weight loss and fever. He had declined antiviral therapy. Physical examination revealed tenderness in the right upper quadrant and splenomegaly. Laboratory tests included the following: white blood cell count, 2000/cmm (reference range, 4000-10,000/cmm), hemoglobin, 11.1 g/dL (13.5-17.0 g/dL), albumin, 3.7 g/dL (3.5-5.0 g/dL), and CD4 count, 17/cmm (410-1590/cmm). CT scan revealed an apple-core lesion at the cecum, suggestive of carcinoma (A). At colonoscopy, a large mass was found in the proximal ascending colon, distal to the cecum (B). The bleeding shown in B was caused by the biopsy. The cecum, and ascending and transverse colon were ulcerated.

Histologic examination of biopsy specimens taken from the mass revealed yeast-like intracellular microorganisms highly suspicious for histoplasma infection and intracellular inclusions characteristic of cytomegalovirus infection. Infection with histoplasma and cytomegalovirus (CMV) was confirmed by Gomori methanamine silver stain (C, orig. mag. $\times 200$) and immunohistochemical stain (D, orig. mag. $\times 200$), respectively.

DISCLOSURE

The authors report that there are no disclosures relevant to this publication.

Xinqing Fan, MD, Larry Scott, MD, *Department of Gastroenterology and Hepatology, Suimin Qiu, MD,* *Department of Pathology, G.S. Raju, MD, Marc Shabot, MD,* *Department*

of Gastroenterology and Hepatology, University of Texas Medical Branch, Galveston, Texas, USA

doi:10.1016/j.gie.2007.11.004

Commentary

For many decades, the appearance of an apple-core lesion on a barium enema was a common finding typical of carcinoma. The term implied a sharply-defined region of annular constriction with overhanging edges, ulcerated mucosa, and an eccentric, irregular lumen. Today, barium enemas are no longer the mainstay of diagnosis of colon malignancy, and the term *apple-core lesion* is rarely used, if not forgotten. CT scans, including the one shown here, seldom give the kind of definition and view of the bowel needed to simulate a properly gnawed apple. As for infectious organisms mimicking cancer, CMV is well known, although many others can, including actinomycosis, amebiasis, and even malakoplakia. The association of CMV and histoplasmosis in a patient with AIDS is unusual, but not unique, and when faced with such an immunocompromised person, it is best to remember that the rule of parsimony, in which one diagnosis is used to explain a variety of findings, is best left outside the patient's room; in patients with AIDS, do not be encumbered by the heuristic maxim of Ockham's razor.

Lawrence J. Brandt, MD
Associate Editor for Focal Points