

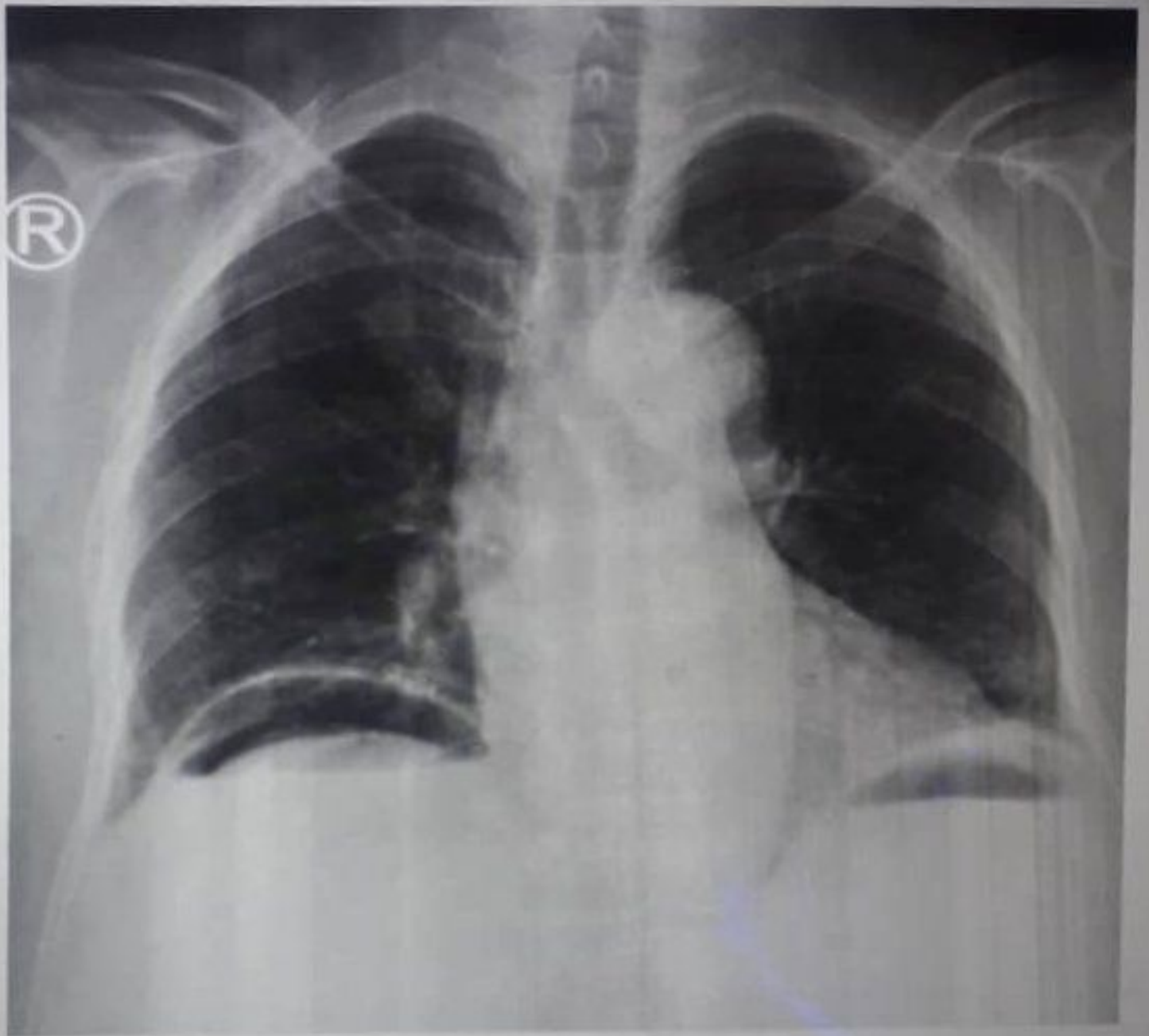
- **Question 1**

- A 34 year old man presents at UTH with a long history of heart burn and taking ranitidine. He is referred to endoscopy clinic where an upper endoscopy is done demonstrating a reddish friable discolouration in the lower oesophagus. A biopsy is done at the site which histologically demonstrates the following;

- a) what is the diagnosis?
- b) what is the pathogenesis of this disorder?
- c) what are its complications?

- **Question 2**

- A 40 year old man presents at UTH and gives a history of epigastric pain which becomes worse when hungry and is relieved with food intake. A urea breath test is positive.
  - a) What is the most likely diagnosis?
  - b) what is the site of the lesion/disorder?
  - c) what organism is responsible for this disorder?
  - d) What special histological stains would you do if a biopsy from this patient is done to highlight this organism?
  - e) what are the complications of this disorder?



- f) Which complication is highlighted in this X-ray?

- **Question 3**

- A 20 year old woman presents a levy mwanawasa hospital with lower abdominal pain, cramps and bloody diarrhoea. After evaluation, a colonic resection is done and is as show below



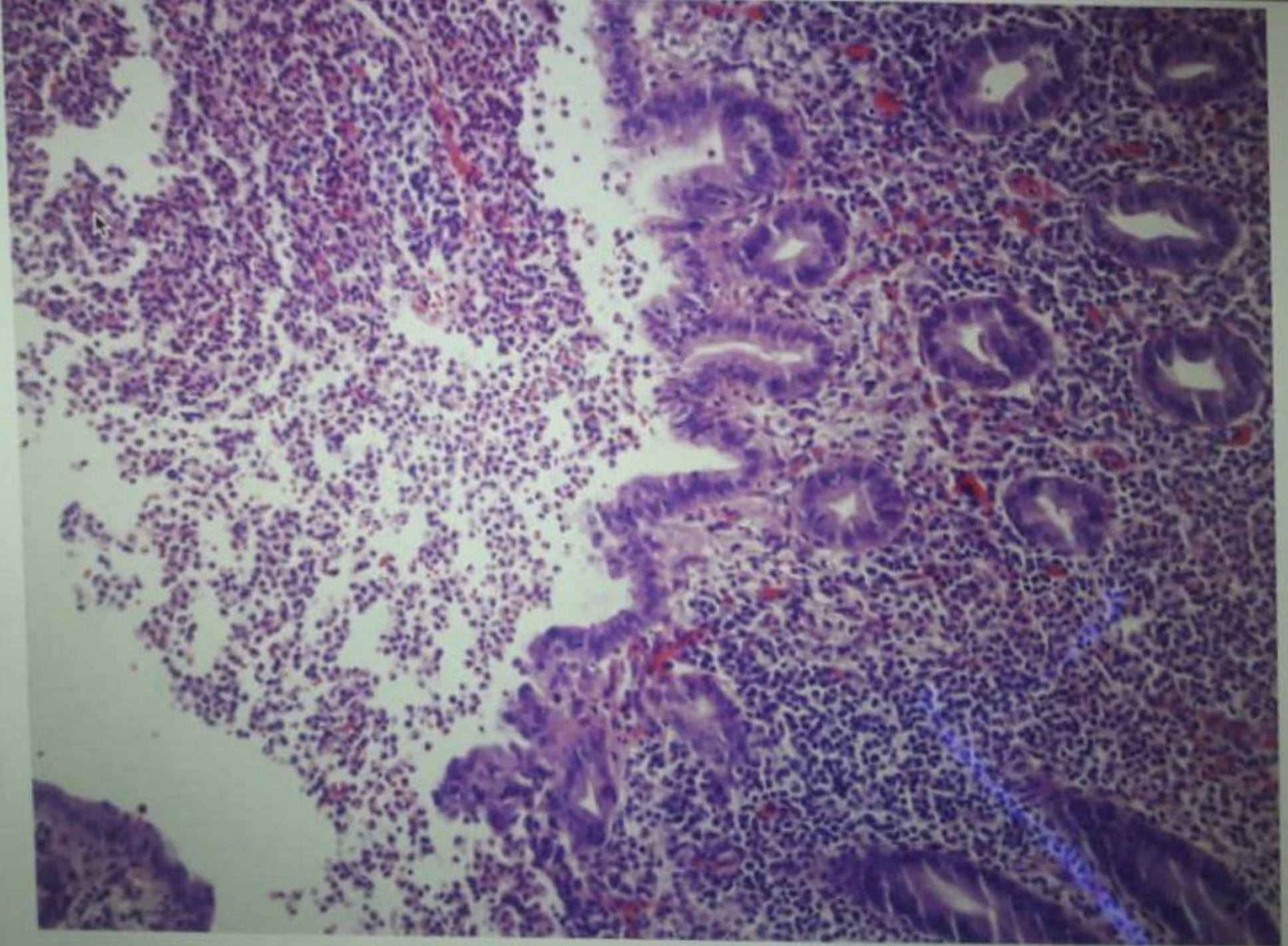
- a) what is the most likely diagnosis?
- b) what are the histologic features of this disorder?
- c) list 3 extra intestinal manifestation?
- d) which liver disorder is associated with this disorder?

- **Question 4**

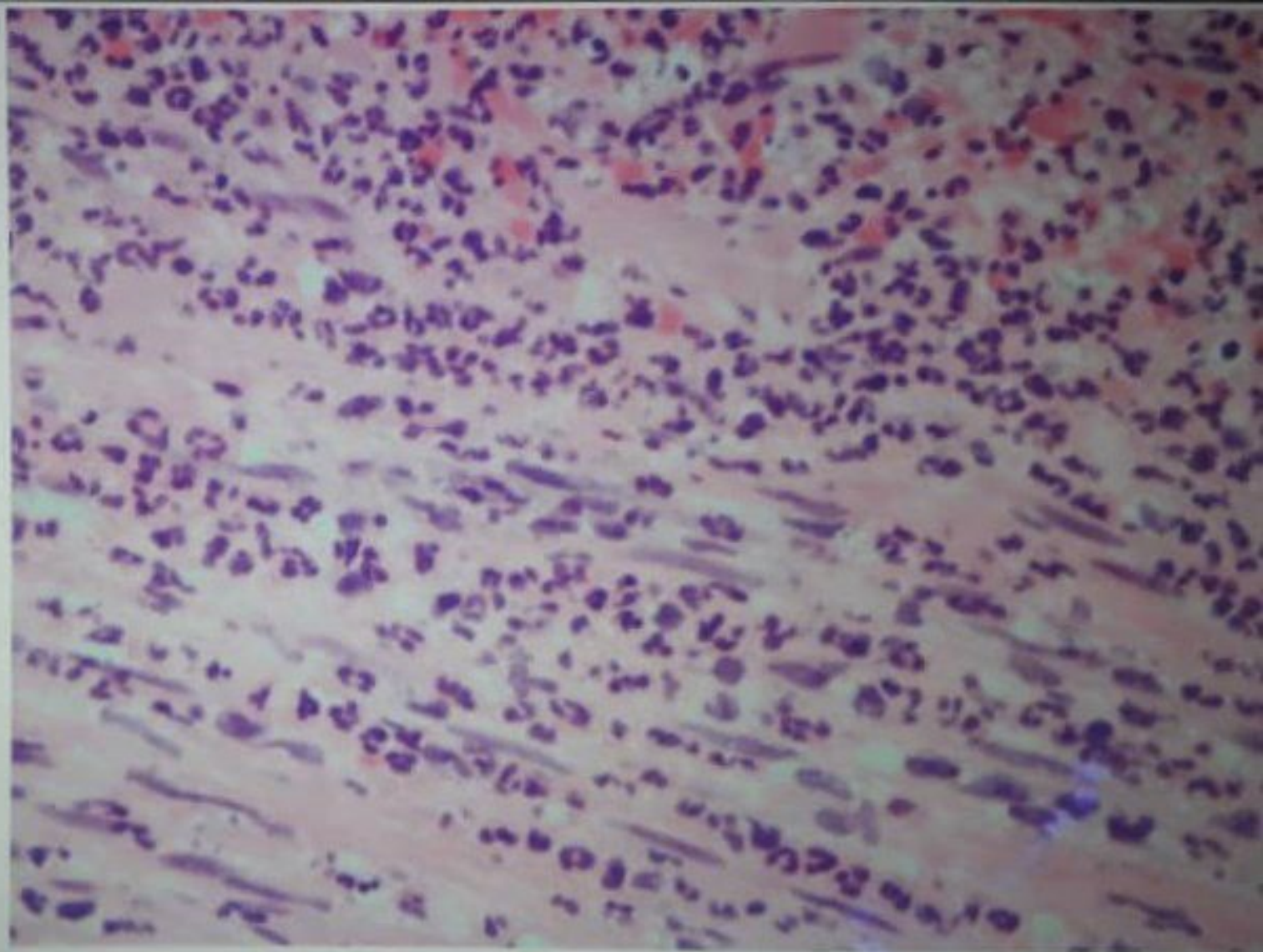
- A 15 year old boy presents at UTH with with a change in bowel habits and a history of dark stool. A colonoscopy is done that demonstrates greater than 100 polyps in the colon.
  - a) what does the patient most likely have?
  - b) which gene is most likely mutated?
  - c) what is the function of this gene and what happens when it is mutated?
  - d) as his doctor what will you recommend as the next course of treatment and why?

- **Question 5**

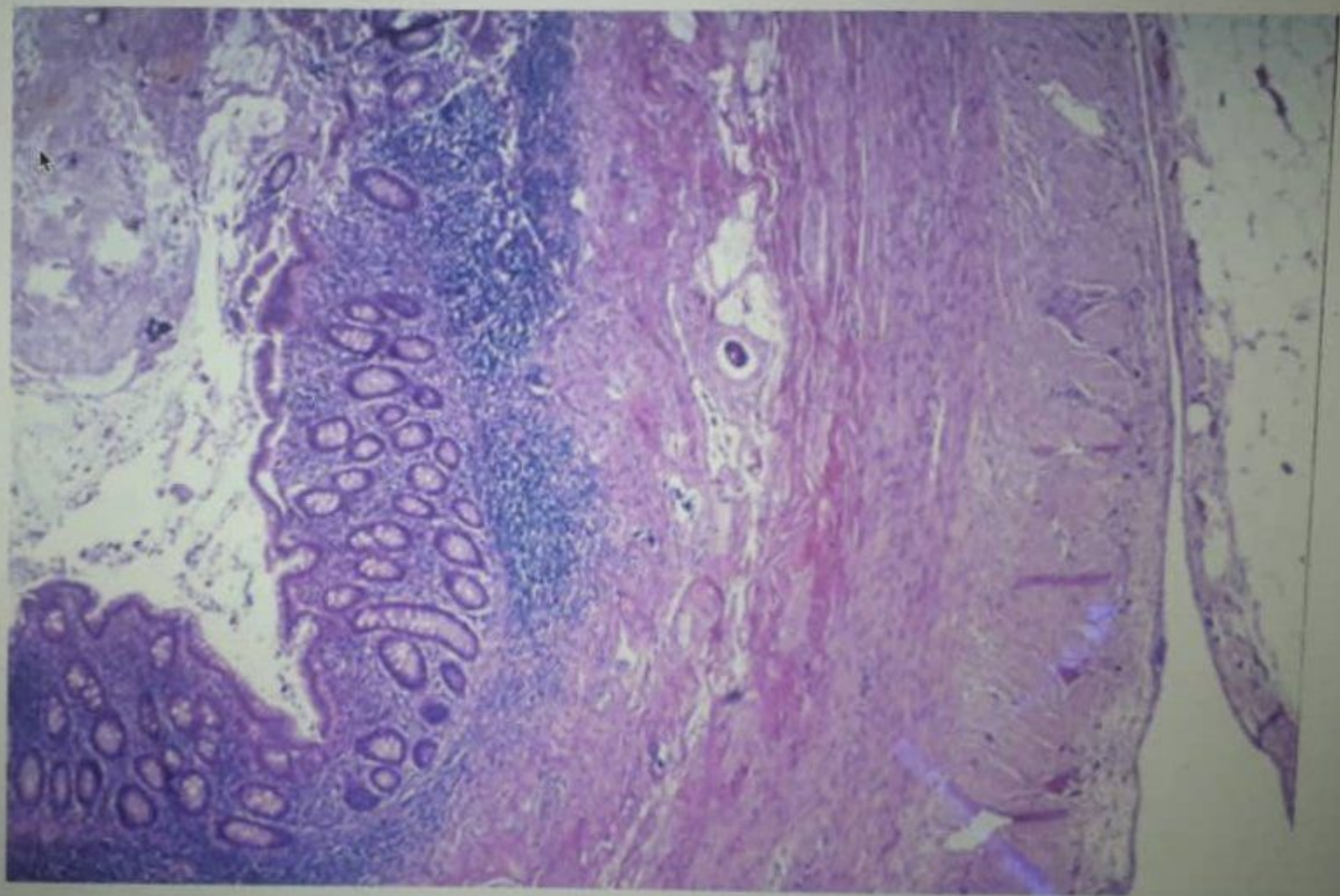
- A 14 year old boy is brought to the paediatric ward at UTH by his mother complaining of fever, vomiting and abdominal pain? The mother informs you that initially the pain was around the umbilicus and it has now moved into the right lower quadrant of his abdomen. A senior surgeon decides to operate and removes what is shown below;



- from patient



- high power view



- normal histology of the organ in previous slides

- a) what is the organ?
- b) what is the diagnosis and why?
- c) what is the criteria for making the diagnosis histologically?
- d) list 3 complication sof this disorder/disease

- **Question 6**

- A 42 year old man presents with hematemesis. He also has abdominal distension and jaundice. Your examination reveals that he has ascites. A hepatic B antibody test is positive.
- a) what is the most likely (direct) reason the patient presented with hematemesis?
- b) what underlying condition does the patient have that predisposes him to having hematemesis?
- c) list 2 complications of this underlying condition?