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Syphilis manifesting as proctitis

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Patients presenting with diarrhea, rectal bleeding and or abdominal pain warrant detailed examination of history of present illness, social history, endoscopic findings and possibly biopsy of the rectum. When pathologists receive a rectal biopsy with features of proctitis, inflammation of the rectum, the differential diagnosis may include infectious and non-infectious causes. The infectious agents are commonly sexually transmitted such as chlamydia, gonorrhea, herpes simplex virus and syphilis. The non-infectious causes mainly include inflammatory bowel disease, medication effects and solitary rectal ulcer syndrome. Symptoms and histologic features may be non-specific and pose diagnostic difficulties. Detailed knowledge of patient's clinical information will guide the pathologists' diagnosis. Herein we present a case of 46-year-old male who had a family history of colon cancer and underwent endoscopy procedure for routine surveillance follow-up. The procedure revealed an unusual appearance of nodular/thickened mucosal folds in the rectum. The biopsy was taken from mid and distal rectum. The histologic findings were consistent with active infectious-type proctitis with no features of chronicity to suggest inflammatory bowel disease. Given the clinical concern for underlying infections, special stains including Warthin-Starry, Giemsa and Gram stains were performed. Giemsa and Gram stains were non-contributory; however, the Warthin-Starry stain revealed numerous spirochetes involving the rectal mucosa. The spirochete immunostain was performed, which supported the diagnosis of syphilitic proctitis. Pathologists may have limited clinical information when they examine endoscopic biopsies, which may lead to a non-specific diagnosis. Although the incidence of syphilitic proctitis/colitis is low, keeping the differential diagnosis in mind will prevent missed diagnosis.

Biography

Eunice K Choi has completed her MD from Indiana University School of Medicine. She has finished her AP Residency Program from Houston Methodist Hospital and currently she is in GI Pathology Fellowship at UCLA.

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