**GI case #2**

**(For students)**

**History:**

**Patient’s profile & chief complaint:**

A 25 year old lady with 6-months history of loose stools, abdominal pain and weight loss.

**History of present illness:**

The patient was doing well until she started to have 5-6 loose stools per day sometimes accompanied by blood. She also reported intermittent right lower quadrant abdominal pain and weight loss of more than 5 Kgs during the last 6 months. She also mentioned that she have fatigue and fever most of the time. She also complaint of painful sores in the mouth and ill-defined severely tender palpable skin lesions on the legs. She denies any history of travel or contact with sick people

**Review of other systems:** Unremarkable.

**Drug history:** Nil.

**Past medical and surgical history:** Similar attacks many times over the past 3 years.

**Social history:** Non-smoker, non-alcoholic, good socioeconomic status.

**Family history:** History of Hashimoto thyroiditis (an autoimmune thyroid disease) in sister.

**Physical examination:**

Unremarkable.

**Learning objectives:**

-Listing the differential diagnoses of change in bowel habits in such age.

-Relating the patient’s profile and presentation to the different GI neoplastic and non-neoplastic conditions.

-Mentioning the pathological findings and their importance in the differentiation between certain GI disease entities.

-Listing the possible complications for this patient’s conditions.

**Questions:**

1-Mention the top 2 differential diagnoses. Why? What did you exclude?

2-Mention further workup to confirm the diagnosis.

3-What is the clinical presentation and its differences between the 2 diseases that you mentioned in your answer to question 1?

4-What are the main pathological findings and the main differences between the 2 diseases.

5-What are the expected complications for the 2 diseases.

6-Mention some comments on the treatment