

Title:

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Apoptotic colopathy as a manifestation of Good's syndrome

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Dear Editor,

The case was a 44-year-old patient with four years of evolution of respiratory infections, fever, weight loss of 30 kg and chronic diarrhea with inconclusive colonoscopy studies, managed as inflammatory bowel disease (IBD), with a history of thymomectomy four years previously. On physical examination, there was severe protein-calorie malnutrition, skin lesions compatible with herpes simplex infection and lower limb edema. Blood tests were requested when pancytopenia and hypoalbuminemia were negative for human immunodeficiency virus (HIV). Chest tomography showed a budding tree pattern and bronchiectasis, but SARS-CoV-2 was negative. A colonoscopy was performed, showing the presence of ulcers in the sigmoid colon with an infectious aspect vs IBD. The biopsies

identified acute colitis with cryptic apoptosis without evidence of chronicity, compatible with cytomegalovirus (CMV) colitis. In the gastrointestinal panel, *Cyclosporidium spp* was documented and management with ganciclovir and nitazoxanide was started with an initial improvement but persistence of clinical deterioration. This was considered as another type of immunodeficiency with the presence of hypogammaglobulinemia, and a diagnosis of Good's syndrome was made due to the association with thymoma and recurrent infections. Treatment with gamma-globulin was started and neurological deterioration was triggered later, with a refractory supraconvulsive state. The patient finally died.

Discussion

Good's syndrome is defined as the presence of thymoma and acquired hypogammaglobulinemia with alterations in humoral and cellular immunity (1), predisposing to recurrent and opportunistic infections, as was the case in this patient. Chronic diarrhea is frequent in these patients, secondary mainly to opportunistic infections that can be confused with other diseases such as IBD. Thus, the pathology is essential to reach an accurate diagnosis, describing an apoptotic colopathy with the presence of CMV in this case that rules out IBD. Apoptotic colopathy refers to inflammation with apoptosis as a predominant histological feature that can be due to multiple causes such as graft-versus-host disease, drugs, infections (particularly CMV and adenovirus), immune disorders and others. This usually requires a specific treatment so it is important to clearly identify them.

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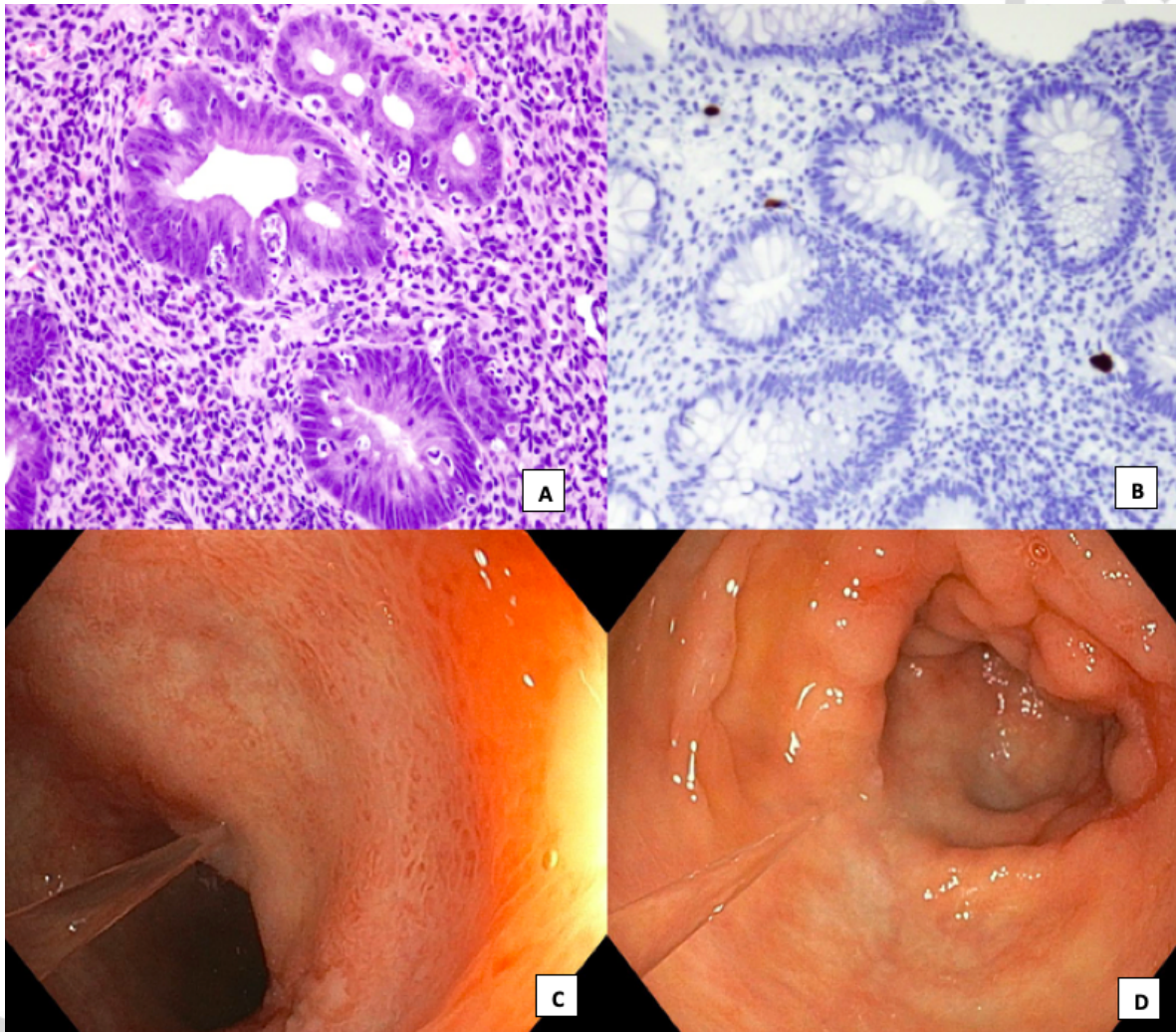


Fig. 1. A. EH 40x. Glandular structures are observed with a marked increase in cryptic apoptosis, increased lymphoplasmacytic infiltrate and neutrophils in the lamina propria. B. Immunohistochemical studies for CMV showing three viral inclusions. C. Mucosa with erythema, erosion and superficial ulcer with fibrin background. D. Punch ulcer in the

sigmoid colon producing mild stenosis.

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