



POSTER PRESENTATION

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# Small intestine enteroscopy: a new diagnostic tool not only in HIV infection

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## Background

Since 2007 the department of infectious diseases of the Vivantes Auguste Viktoria Klinikum Berlin, Germany has established the single balloon enteroscopy of the small intestine. To demonstrate the usefulness of this method we report a case of a 48 year old HIV positive patient.

## Methods

Case report and analysis of electronic data base for results of enteroscopies since 2007.

## Results

Admission with anemia and reported bloodloss, which was not seen by professional health care workers. CD4 count 70/ml, viral load < 50 copies, HAART since 6 month. Gastroscopy and colonoscopy showed no evidence of current GI bleeding and revealed no bleeding source. Staging by CT scan (cerebral, cervical, thoracical and abdominal) showed lymphnodes smaller than 1 cm, no suspicion for lymphoma, especially in the small intestine. Bone marrow biopsy was without pathological findings. The patient received blood transfusion, hemoglobin levels remained constant. To complete our diagnostic approach we performed a single ballon enteroscopy via oral routine. Approximatly 210 cm a.d. we found a semicircular ulcerating lesion followed by a circular protruding and ulcerating tumor which could not be passed. Histology showed a b-cell lymphoma (diffuse large cell, CD20 positive).

## Discussion

The case report demonstrates the usefulness of the new method of single balloon enteroscopy. In our experience

10% of all enteroscopies in HIV infection discovered pathological findings with therapeutic consequences.

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