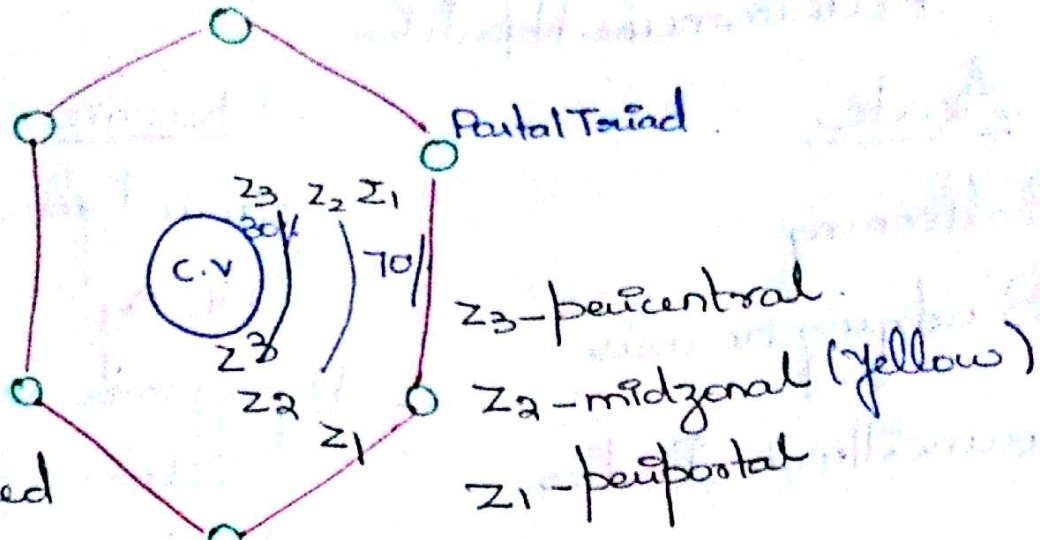


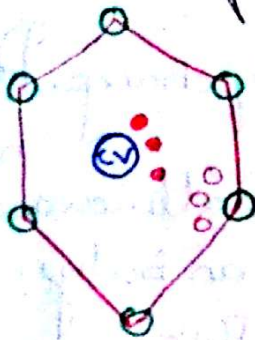


Toxin-induced

injury → Zone-1

Infarction - Red infarct > white infarct.

Chronic passive congestion → Nutmeg liver.



Pericentral: Congestion

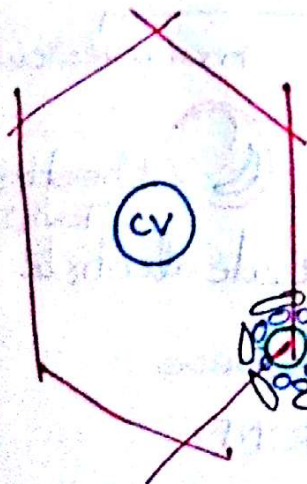
Necrosis

↓
dead cell.

Dark Red.

due to RBC congestion.

Periportal
viable hepatocytes
yellow tan.



Limiting plate
Single layer of cells
around portal
Triad.

Chronic active

Limiting
plate
damage

by
lymphocytes

Chronic Persistent

Limiting plate
Intact.

Autoimmune Hepatitis

Acute

- Ballooning
- Bridging necrosis
- Councilman Bodies

Bridging necrosis

only central-portal



Chronic

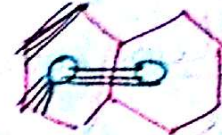
ground glass

HbsAg

Hydzyannis cells /
Shikata cells

Bridging necrosis ->

(all other in chronic)
fibrosis



→ Fatty change, Piecemeal
necrosis

[m]c intracellular accumulation
in human body

pan -> TOL

Steatosis

microvesicular

macrovesicular



Phosphorus
Toxicity

- early alcoholic

→ Late alcoholic

Reye's Syndrome

→ Obese

ICC

→ DNT

→ TPN

Lysosomal lipase
deficiency

→ Jejunal atresia
surgery

Valproic acid / Tetracycline

- malnutrition

Autoimmune Hepatitis - Female.

S ↑ IgG - all other markers (-)

→ Responds well to Immunosuppressants

I

↓

ab.

ANA - m/sensitive

→ SMA -
most specific.

I

Anti-LKM
Liver kidney
muscle.

I - Hep-C.

II - Drugs.

III - Hep-D.

III

Soluble Liver Antig.

1) piecemeal necrosis

2) Hepatic Rosette.

3) emperipolesis.

Hep-C characteristic Histopath: Liver Biopsy

1) Councilman bodies.

2) Portal Tract - lymphoid aggregate (III - LN Tissue)

Hep-B Serology -

i) earliest marker - HbsAg.

Best epidemiological - HbsAg

ii) Best Acute infection - IgM Antibody HBe.

Best for window period.

iii) Infectivity - HBeAg

qualitative marker for viral Replication.

quantitative - HBV DNA > HBV DNA polymerase.

HbeAg → anti HbeAb : Seroconversion.

Super Carrier

HbsAg ↑; HbeAg ↑
HBV-DNA ↑.

Simple Carrier.

HbsAg ↑.

HbeAg (-).

HBV-DNA (N) | - mild elevation.

Basal cell mutant $\uparrow$ Risk of Carcinoma / HCC

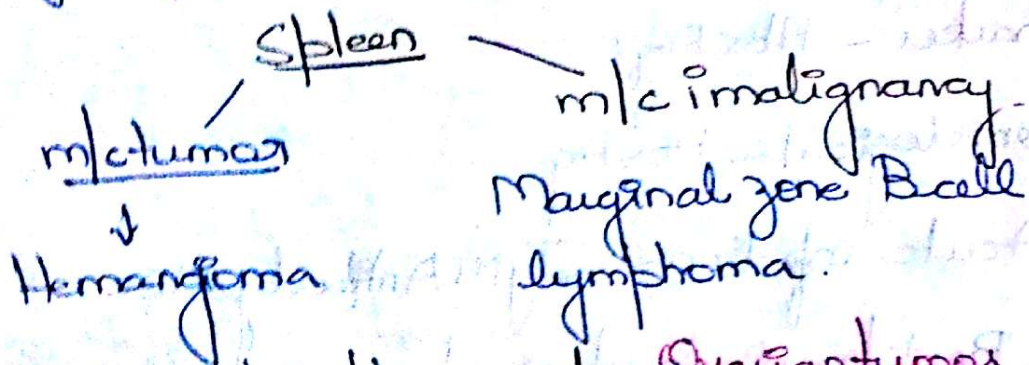
Liver Tumor

m/c Liver tumor - Metastasis (from Colorectal)

m/c Benign tumor - Cavernous Hemangioma

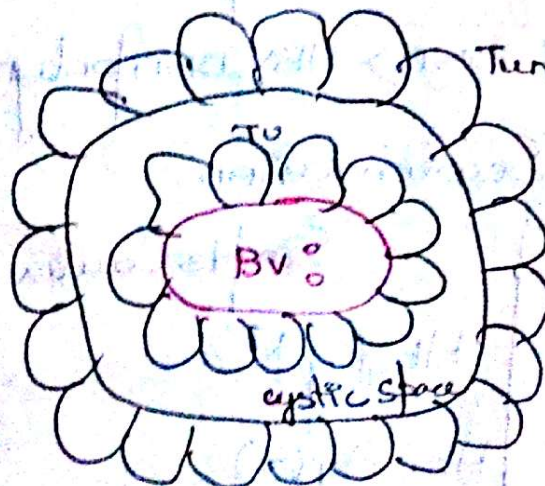
$\rightarrow$ i malignancy (adult) $\rightarrow$ HCC (Hepatoma)

$\rightarrow$ i malignancy - Pediatric $\rightarrow$ Hepatoblastoma



m/c Cause of isolated Splenic mets: Ovarian tumor

m/c i for splenic mets - melanoma (m/c Cause)



Tumor cells

Glomeruloid

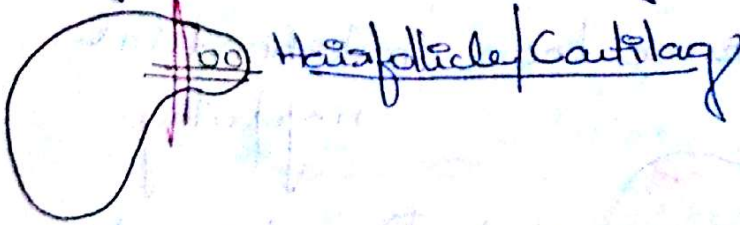
Schiller duval body

Yolk Sac tumor

↑ Estrogen - endometrial Ca.

Reinke's Crystal - Hilus cell tumor

Retenancy protuberance - Benign Cystic Teratoma

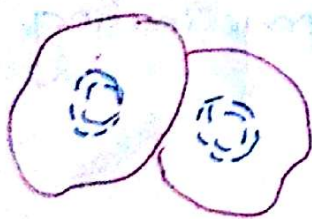


Risk of malignancy - (1%) Squamous Cell Ca.

Nuclear features - dx:

Papillary Ca of thyroid

- 1) Optically clear nuclei (orphan annie eye) (without nucleochromatin)
- 2) Nuclear grooving.
- 3) Pseudo inclusions (Cytoplasm dragged into nucleus)



Rimmed Vacuoles - Inclusion Body
(Basophilic staining) myositis.

Target Fibres - Denervation atrophy (Motor neuron disease)

Basophilic Hue of Regenerating muscle fibres -

Duchenne muscular dystrophy

Nemaline Rod myopathy
E-NT Z like Structures / Zebra Bodies

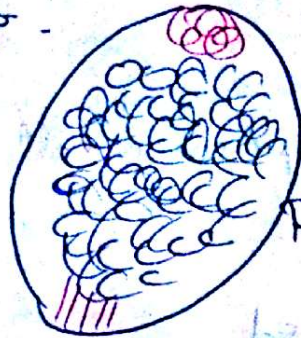
made up of α -actinin

Floppy infant, Rod like structures on special stain.

Intermittent muscular weakness - mitochondrial myopathy

muscle fibres -

Ragged



Red-Ragged myofibres

Red-damaged mitochondria

E. NT $\rightarrow$ Parking lot inclusions.
NT Mitochondrial myopathy.

Onion bulb neuropathy -



Segmental myelination & demyelination.

$\rightarrow$ CIDP - Chronic inflammatory demyelinating polyradiculoneuropathy.

$\rightarrow$ Charcot - NT aie tooth disease.

Urine examination -

$\rightarrow$ Em/C crystal - Calcium oxalate.

shape - Calcium oxalate.

envelope - Calcium oxalate Dihydrate

Coffin shaped - Triple phosphate.

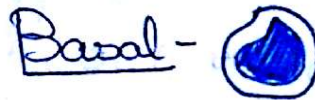
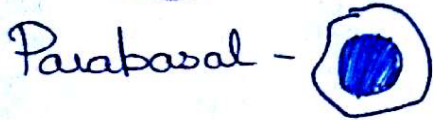
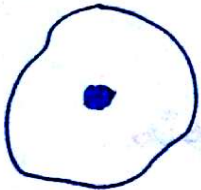
muddy casts + Calcium Oxalate → ethylene glycol poisoning.

Pap smear

↑ Superficial cells → estrogenic phase.



Intermediate cell → Progesterone phase.



Trichomonas Vaginalis: Leptothrix thin filament
elongated nuclei



Bacilli

when leptothrix (+) → Trichomonas usually +ve.

Candida - yeast + hyphae.

Clue cells - Basophilic Border of Squamous cells.

Actinomyces - Cotton Ball, Sun Ray filaments [H/O-100]
cyto-blue
Histo-pink.



Translucent Vacuole like structures in Squamous ab



Bullous pemphigoid → BP Ag 2.

Inflammation - cluster of mast cells, eosinophils

Thorough & thorough Biopsy, Ribbon Candy

Dermatitis Herpetiformis - Neutrophils infiltrate only in dermal tip.

→ dermal tip type of immunofluorescence

ER/PR positivity

ER, PR - IHC → nuclear IHC positive

↓
Braun (low) - good prognosis.

Hex 2-neu - membranous IHC.

Bad prognosis.