Intestinal Tuberculosis After Successful Treatment of Advanced High-Grade Non-Hodgkin's Lymphoma and AIDS

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Figure 1 A 43-year-old man with AIDS and high-grade non-Hodgkin's lymphoma, stage IVB, had been successfully treated with chemotherapy 30 months previously. He now presented with progressive intra-abdominal lymph-node enlargement, transudative pleural effusion, ascites, diarrhea, anasarca, and cachexia. Enteroscopy showed thickening, erythema, and nodularity of the mucosa, with superficial ulceration throughout the duodenum and jejunum.

Figure 2 Jejunal biopsy revealed a diffuse histiocytic infiltrate within the lamina propria, containing acid-fast bacilli. The patient responded to antituberculosis therapy.