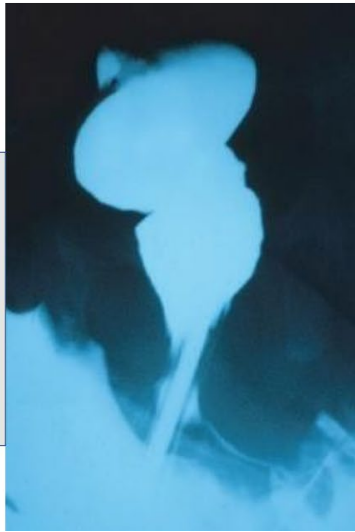


- This pic illustrates the **barium enema** with contracted rectum and dilated proximal colon



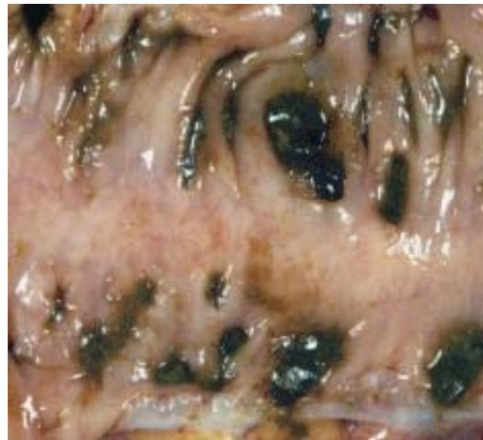
- Here you can see the macroscopic appearance of a hirschsprung disease, you can see the **contracted rectum** and the progressively dilated proximal normal segment

Sigmoid diverticulum

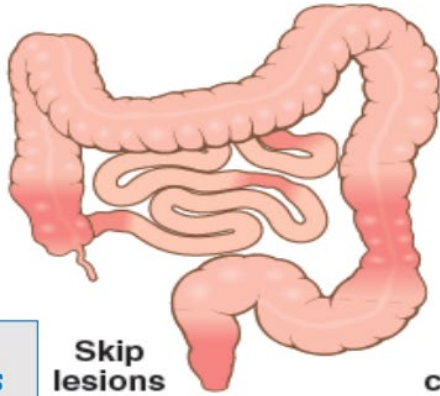
Notice the outpouching



Obstruction by fecal material; leads to inflammation



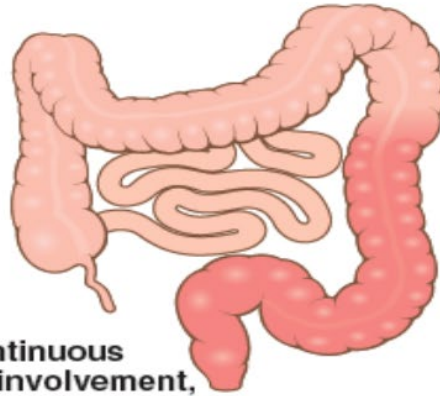
### CROHN DISEASE



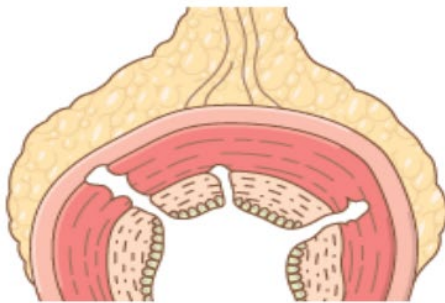
Single regions

Skip lesions

### ULCERATIVE COLITIS

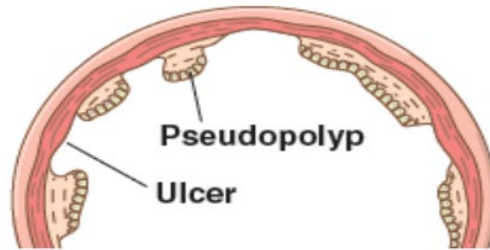


Continuous colonic involvement, beginning in rectum



Transmural inflammation  
Ulcerations  
Fissures

Deep

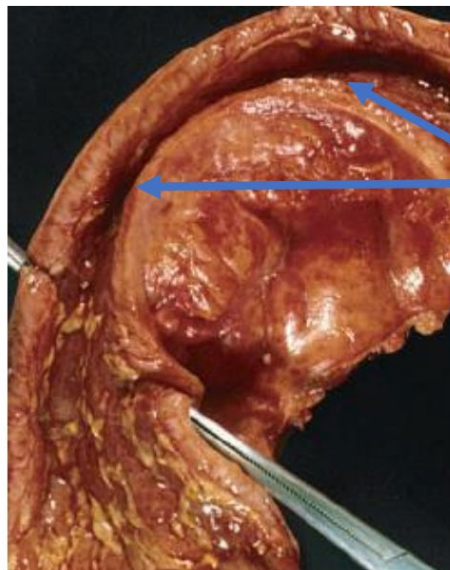


Pseudopolyp  
Ulcer

Shallow, involving mucosa and submucosa only

## Small bowel stricture.

↓  
Crohn's Disease



Notice how the lumen becomes narrow here

crohn's  
extraintestinal  
manifestations

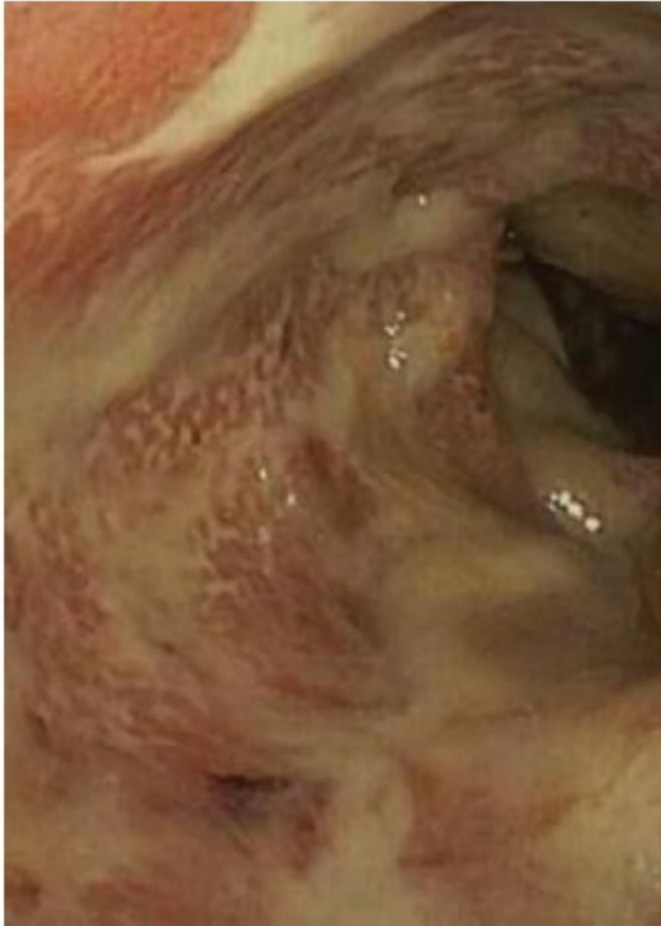


# Toxic megacolon

U. Colitis



# Ulcerative Colitis



U. Colitis



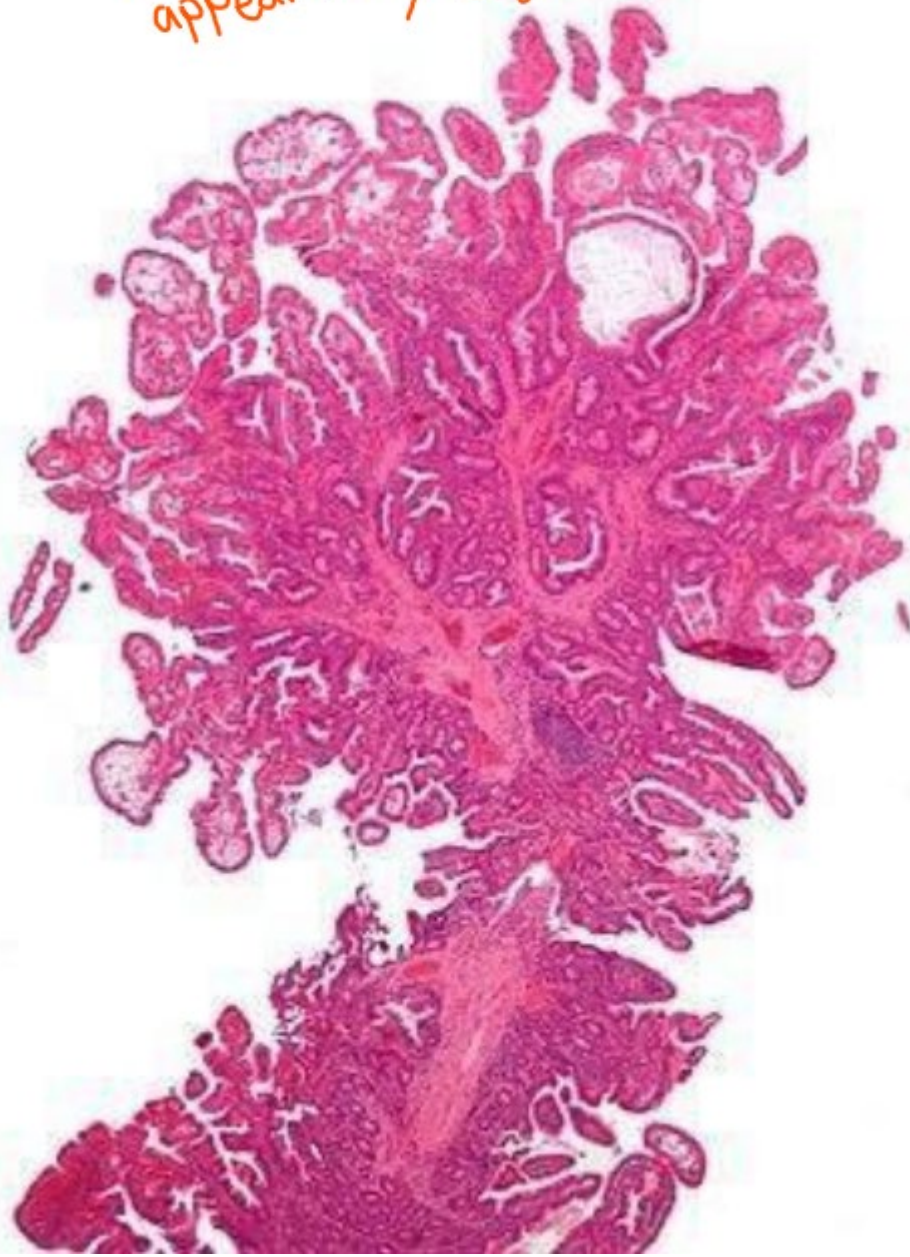


U. Colitis

no  
skip

lesions

Christmas  
tree  
appearanc / Peutz  
Jeghers

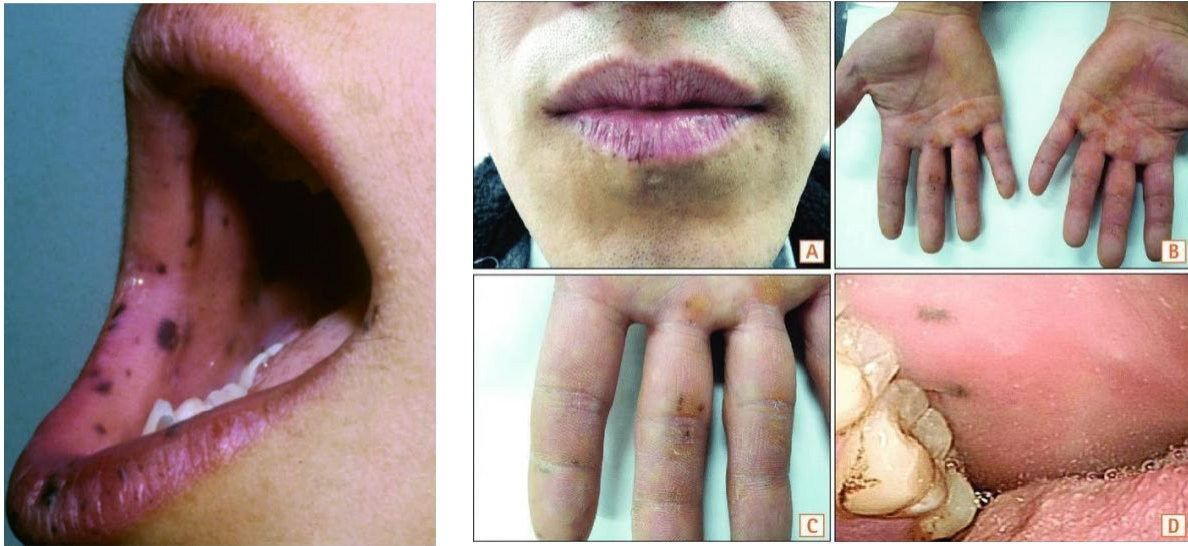




# Mucocutaneous pigmentation

In the mouth - around the mouth - on the skin

✓ Typically associated with Peutz-Jeghers Syndrome

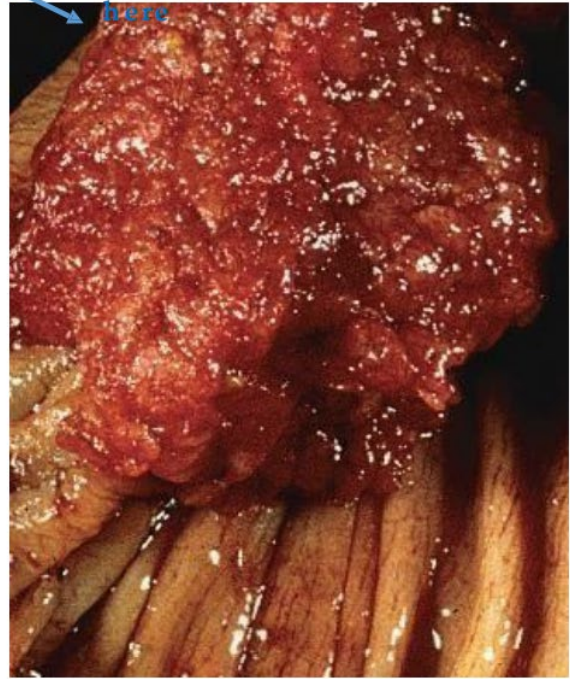


Pedunculated or sessile Adenoma

smooth surface here



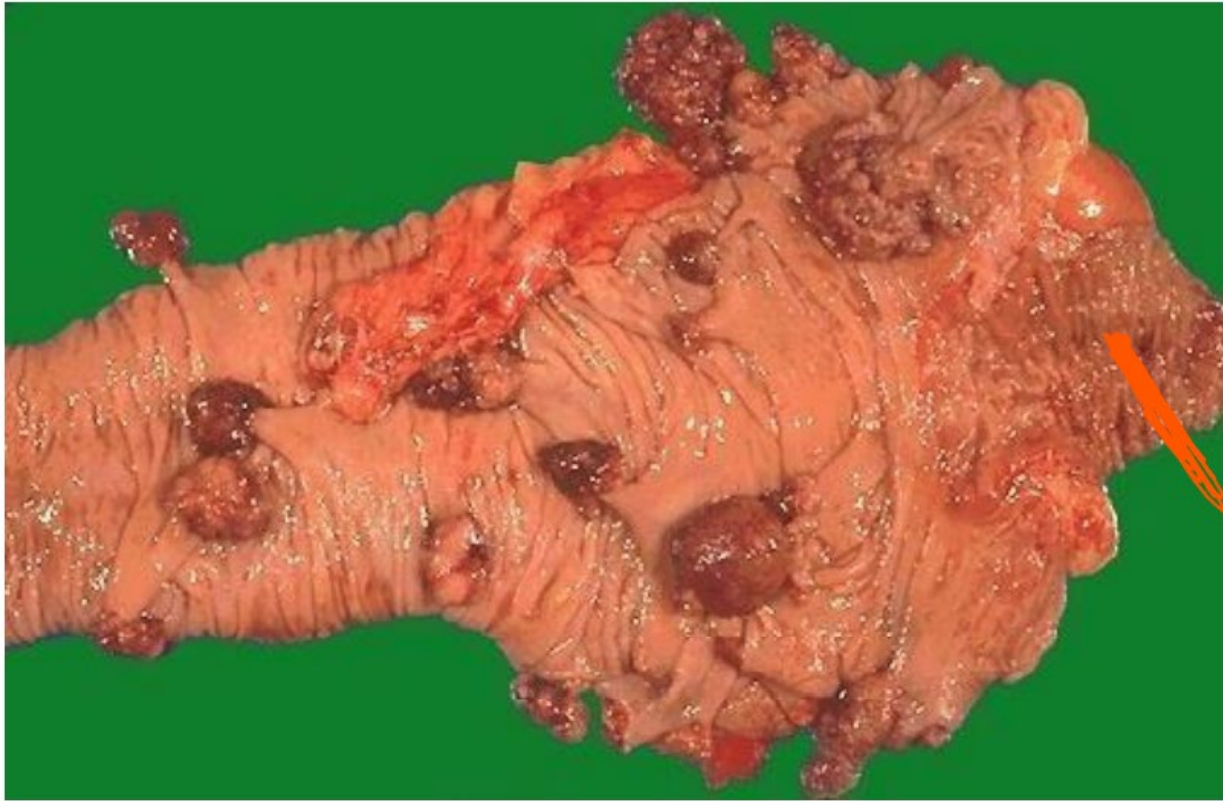
velvety surface here



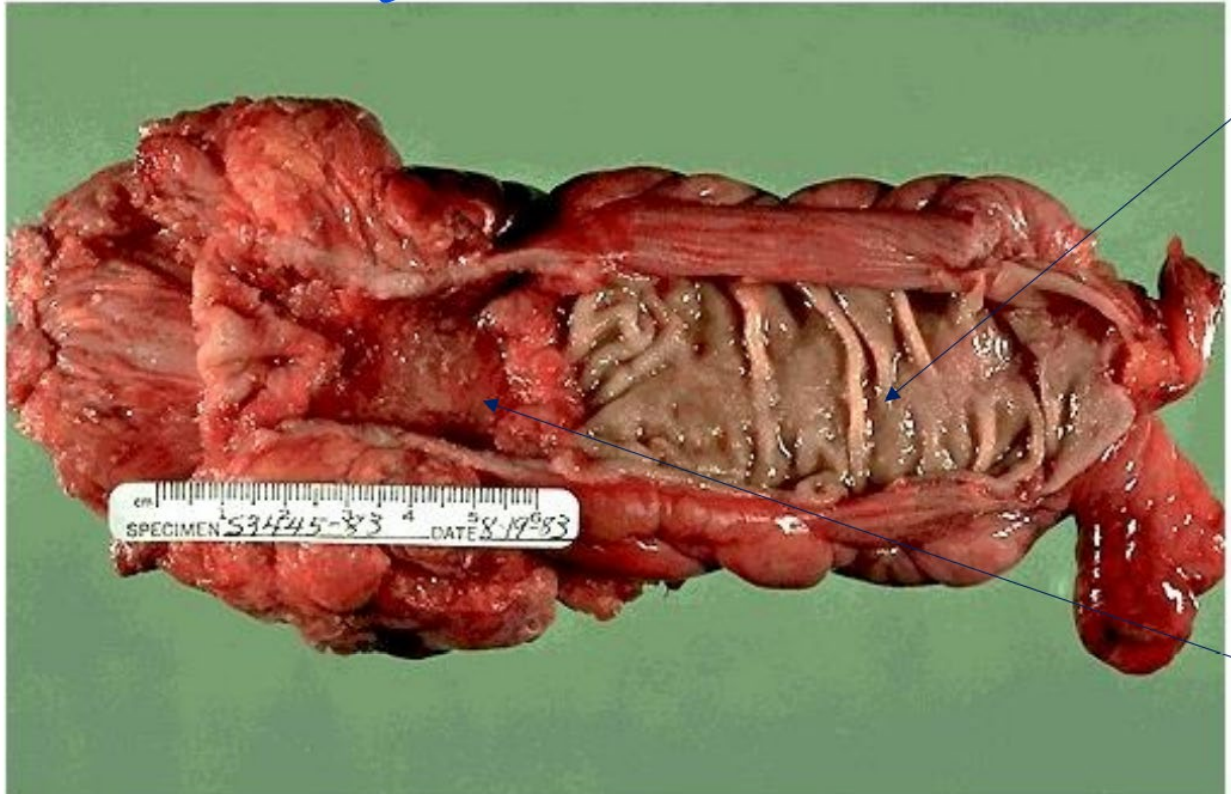
Biopsy from colon of patient with Classical FAP



## Cecal polyps in HNPCC



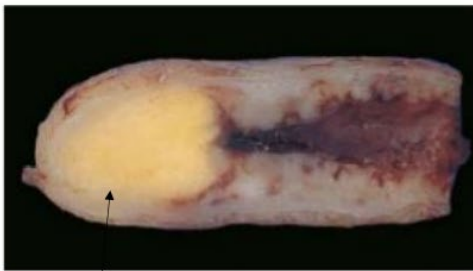
napkin ring, distal colon, adenocarcinoma



Exophytic, adeno C.

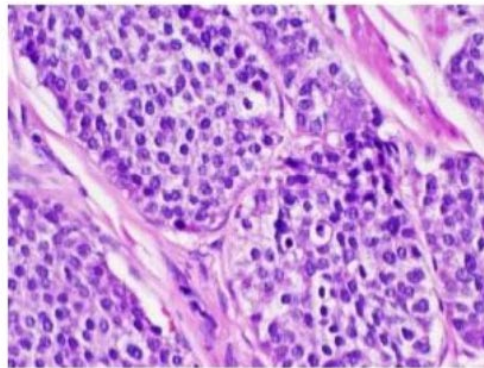


## Carcinoid tumor



Gross

Yellowish-well circumscribed Mass in the tip of the appendix



Microscopic

Nesting pattern, abundant cytoplasm, salt and pepper chromatin similar to other neuroendocrine tumors that had been discussed earlier.