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## EDITOR'S QUIZ: GI SNAPSHOT .....

### Haemorrhagic gastritis in a neurologically impaired boy

Robin Spiller, editor

#### Clinical presentation

A 7-year-old boy, affected by spastic quadriplegia secondary to perinatal respiratory distress, presented with a 15-day history of severe abdominal pain. Paracetamol and omeprazole brought no relief. On physical examination, the boy was in a poor general state, but with normal vital signs, and with a flat and soft abdomen without tenderness. There was no organomegaly. However, diffuse hyperkeratosis, joint pain and petechial haemorrhages on the legs, together with swollen and friable gums were present. He had no history of trauma, fever or weight loss. Initial blood tests for haemachrome, electrolytes, coagulation factors, liver and muscle enzymes, renal function, rheumatoid factors and infectious agents were all normal. The erythrocyte sedimentation rate was 40 mm/h and C-reactive protein was 5.87 mg/dl (reference range <0.50). Cardiac function and abdominal ultrasound evaluation were unremarkable. Upper endoscopy showed a haemorrhagic aspect of the antrum with diffuse petechiae, very similar to that observed at the cutaneous level (fig 1) without any evidence of *Helicobacter pylori* infection.

#### Question

What is the diagnosis?

See page 1535 for answer

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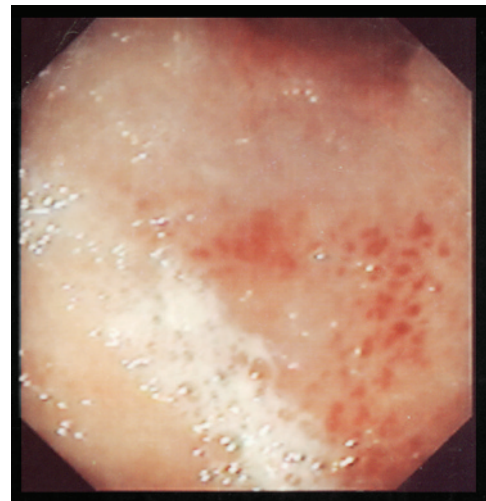


Figure 1 Endoscopic view of the antrum.

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