WSC 2014-2015, Conference 11

Case 1. Tissue from a horse.

Colon (1 pt.): Diffusely, colonic glands are surrounded, separated (1 pt.) and occasionally replaced by large numbers of lymphocytes (1pt.) and plasma cells (1 pt.), fewer histiocytes (1 pt.), neutrophils, and eosinophils, as well as moderate interstitial edema (1 pt.). Scattered throughout the section, the mucosa contains cross- and tangential sections of larval nematodes (1 pt.) which expand and occasionally replace colonic glands. These nematode larvae range from 20um with a pointed tail and minimal organ differentiation (1 pt.) (L3) to large nematodes which range up to 140um with a thick cuticle, pseudocoelom, meromyarian-platymyarian musculature, large lateral cords, and an intestinal tract composed of few uninucleated cells (1 pt.) which occasionally contains blood pigment. (1 pt.) Occasional colonic glands are dilated, lined by attenuated and/or necrotic epithelium (crypt abscesses) Mitotic figures are prominent within all colonic glands. The submucosa is hypercellular (1 pt.), with a diffuse infiltrate of low numbers of lymphocytes, plasma cells, and macrophages, numerous fibroblasts, and edematous (1 pt.), with dilated lymphatics and markedly congested capillaries. There is moderate lymphocytolysis in submucosal lymphoid aggregates. (1 pt.)

MORPHOLOGIC DIAGNOSIS: Colon: Colitis, histiocytic and lymphoplasmacytic, diffuse, moderate, with numerous mucosal strongyle larvae. (3 pt.)

CAUSE: Cyathostome (small strongyle) larvae (3 pt.)

O/C: (1 pt.)

WSC 2014-2015, Conference 11

Case 2. Tissue from a cynomolgus monkey.

(NOTE: Not much of a descriptive slide. The parasite description is important, but it doesn't really make 20 good points).

MICROSCOPIC DESCRIPTION: Omentum (1pt.): Expanding the omental adipose tissue is a cross-section of a coiled 2 x 1.5 mm pentastome (1pt.) nymph (1pt.) with a pseudosegmented body wall. The chitinous (1pt.) cuticle is 5 um wide and has pit-like, sclerotized openings (1pt.) to skin glands. There is a prominent body cavity metamerically arranged striated muscle (1pt.) subjacent to cuticular annulations, numerous acidophilic glands (2pt.) that surround the intestine, and a digestive tract with villi lined by columnar epithelium (1pt.) which contains blood pigments (1pt.). The anterior end contains two sickleshaped cephalic hooks (1pt.) The parasites are surrounded by a 5-7um thin layer of amorphous, eosinophilic material that contains sclerotized openings (shed cuticle) (1pt.), a small amount of hemorrhage, and is bounded by a 50um fibrous capsule (1pt.) with dilated capillaries and plump fibroblasts and few lymphocytes (1pt.) often in small aggregates.

MORPHOLOGIC DIAGNOSIS: Omentum: Encapsulated pentastome nymph. (2pt.)

CAUSE Armillifer armillatus (actually A. agkitrodontis) (3pt.)

O/C: (1pt.)

WSC 2013-2014, Conference 11

Tissue from a woodchuck.

MORPHOLOGIC DESCRIPTION: Skeletal muscle (1pt): Expanding and effacing skeletal muscle are numerous abutting fibrous cysts (2pt) which contain cross- and tangential sections of viable and degenerating cysticerci (2pt.) which are composed of a central scolex with a thick serrated cuticle (1pt), spongy body cavity (1pt), numerous subcuticular somatic cell nuclei, numerous calcareous corpuscles (1pt), rostellum with numerous birefringent hooklets ("armed rostellum") (1pt), occasionally invaginated within a 10um bladder (1pt) wall. Degenerate cestodes often contain large aggregates of crystalline mineral. (1pt) The fibrous connective tissue separating cysts contains variably sized aggregates of histiocytes, lymphocytes, fewer eosinophils and plasma cells, (1pt) Rarely, cysts are collapsed and contain large numbers of neutrophils and aforementioned inflammatory cells within their walls. (1pt). Throughout the section, remaining skeletal myocytes are variably shrunken (atrophic) (1pt), hyalinized, fragmented, and contain clear vacuoles and rare contraction bands (degeneration and necrosis). (1pt)

MICROSCOPIC DIAGNOSIGYS: Skeletal muscle: Multiple cysticerci with fibrosis and moderate histiocytic and atrophic rhabdomyositis (3pt)

CAUSE: Taenia crassiceps (2pt)

O/C: (1pt)

WSC 2014-2015, Conference 11

Case 4. Tissue from a dog.

(NOTE: There is significant variation between slides. Some slides contain two sections, one of a large area of hemorrhage and infarction, and one with a more diffuse inflammatory lesion with nematode-induced vascular changes, which is described below.)

MICROSCOPIC DESCRIPTION: Diffusely, alveolar septa are expanded by variable combinations and concentrations of histiocytes, neutrophils and rare multinucleated giant cells (1 pt.) admixed with necrotic debris, edema, collagen and hematoidin, and are occasionally lined by hyperplastic type II pneumocytes. (1 pt.). Alveoli throughout the section contain various combinations of nematode eggs and larvae, admixed with multinucleated foreign body-type macrophages (1 pt.), polymerized fibrin, and edema. Nonembryonated eggs are round to oval, 40-50 um in diameter, filled with eosinophilic granular material and contain a single basophilic often eccentric, 10 um diameter nucleus (1 pt.). Embryonated eggs are 150 x 50 um and multinucleated (1 pt.). Larvae (1 pt.) are 150 x 50 um and composed of numerous round, 4-6 um diameter, basophilic nuclei with scant eosinophilic cytoplasm and a smooth 1 um wide amphophilic cuticle (1 pt.). Similar inflammatory components, egg, and larvae have refluxed into adjacent bronchioles. Throughout the section, arterial walls are markedly thickened by smooth muscle (1 pt.) and often contain organizing fibrin thrombi (1 pt.) and adult nematodes (1 pt.), which are 500 um in diameter, with a 5 um thick smooth hyaline cuticle, coelomyarian-polymyarian musculature, lateral chords, large multinucleated intestinal tract, and reproductive tract (1 pt.). Larvae and eggs are enmeshed within the fibrin thrombi, and are admixed with necrotic debris, siderophages, macrophages, lymphocytes, and plasma cells. Some vessels which contain larval nematodes and eggs have a markedly thickened tunica intima which is thrown into villar projections and contains abundant collagen villar endarteritis) (1 pt.). Adjacent to a large thrombosed artery, the alveoli contain abundant hemorrhage (1 pt.) in addition to inflammatory cells, non-cellular components of inflammation, and eggs and larvae previously described.

MORPHOLOGIC DIAGNOSIS: Lung: Pneumonia, interstitial, granulomatous, chronic, multifocal, marked, with severe arterial hypertrophy, villar endarteritis, thrombosis, and numerous nematode adults, larvae and eggs (4 pt.)

CAUSE: Angiostrongylus vasorum (2 pt.)

O/C: (1 pt.)