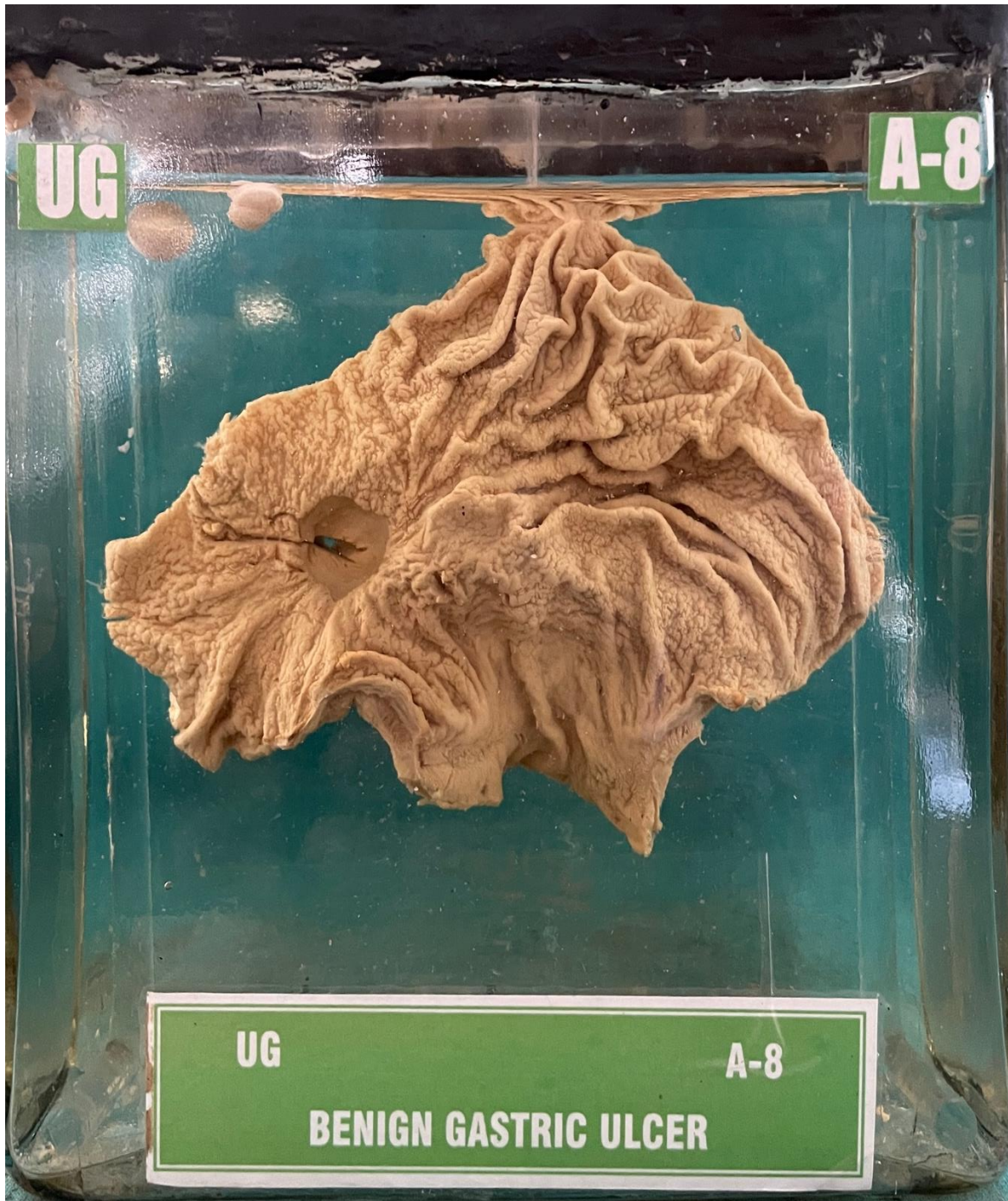


A8 – BENIGN GASTRIC ULCER



BENIGN GASTRIC ULCER

A man of 46 years had intermittent epigastric pain for 20 years, which was relieved by food or alkali. About 6 months back he suffered gastric hemorrhage followed by black tarry stools. Gastroscopy showed an ulcer in the middle third and on the anterior portion of the lesser curvature. Gastrectomy performed.

GROSS APPEARANCE: Specimen of stomach showing a circular ulcer measuring 1.5 Cms. situated near to lesser curvature and on anterior surface. The margins are regular and punched out. The floor is clear and almost extended to the serosal surface. There is thickening of serosa. The rugae are converging on to the ulcer. Rest of the gastric mucosa is normal.

- HISTOPATHOLOGY:
1. Sharply demarcated edge of the ulcer has got a thin layer of necrotic fibroid debris.
 2. Below this layer is the zone of active cellular infiltrate mostly neutrophils.
 3. The muscularis mucosa and muscle coat tend to converge towards the ulcer.
 4. The deeper layer shows active granulation tissue infiltrated with mononuclear leucocytes. granulation tissue rests on the fibrous

