

CASE NUMBER: 04F-40-P3-21

DATE: May 24, 2004

**HISTOPATHOLOGY:**

Slide 106, P3-21-1:

1). Kidney, hematopoietic tissue: Hyperplasia, lymphomyeloid, moderate, diffuse

There are no significant lesions in the spleen, liver or heart.

Slide 107, P3-21-1A:

1). Kidney, as in slide 1, but more localized involvement

There are no significant lesions in the spleen, liver or heart.

Slide 108, P3-21-2:

- 1). Kidney, as in slide 1, but more localized involvement
- 2). Skin, epidermis: Hyperplasia, moderate, focally extensive, with lymphocytic exocytosis, scattered hemorrhage, karyorrhexsis, and intermittent ulcers

There are no significant lesions in the spleen, liver, skeletal muscle, or heart.

Slide 109, P3-21-2A:

- 1). Skin, as in slide 2A.
- 2). Kidney: As in slide 1.

There are no significant lesions in the spleen, liver, skeletal muscle, or heart.

Slide 110, P3-21-3:

- 1). Skin: Dermatitis, moderate, multifocal, erosive and ulcerative, subacute with mucinous degeneration of the superficial dermis

There are no significant lesions in the spleen, kidney, liver, skeletal muscle, or heart.

Slide 111, P3-21-3A:

- 1). Skin: As in slide 3, but less extensive cutaneous involvement.
- 2). Kidney: As in slide 1.

There are no significant lesions in the spleen, liver, skeletal muscle, or heart.

**COMMENTS:**

There are two pathologic processes noted within the examined sections, the ulcerative and erosive dermatitis and apparent lymphomyeloid hyperplasia. The cutaneous lesions are non-specific and likely would have contributed only mildly to moderately to antemortem morbidity. The hyperplastic response and lymphocytic exocytosis are suggestive of a poxvirus infection; however, close evaluation of Malpighian cells failed to reveal any discernible inclusions. The erosions and ulcerations tend to feature abrupt

margins suggestive of physical trauma or excoriation as prime considerations. The preponderance of lymphomyeloid maturing cells relative to other lineages within the hematopoietic tissue is suggestive of chronic antigenemia. The lack of additional systemic alterations in sectioned tissues (endocardium, splenic ellipsoids) suggests a possible localized effect. Fish should be evaluated for possible systemic signs of myelophthosis and further investigation may be considered. This change may be secondary to the cutaneous process.

**\*FINAL REPORT\***