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**Title:** Coexistent granulomatosis with polyangiitis (Wegener's) and Crohn disease: A clinicopathologic description of cases

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**Body:** Background. Crohn disease (CD) may lead to various extraintestinal manifestations, including, rarely, respiratory tract involvement. When necrobiotic pulmonary nodules are present, the differential diagnosis includes granulomatosis with polyangiitis (Wegener's) (GPA). The respiratory tract manifestations of CD and GPA may mimic each other, complicating the diagnosis and suggesting the possible coexistence of these two conditions. Aims. To describe the clinical, radiographic and histopathologic features of patients in whom CD and GPA coexist. Methods. We reviewed the teaching files of the authors and searched the Mayo Clinic medical records for coexistent inflammatory bowel diseases and ANCA-associated vasculitides of the lungs. We reviewed in detail 97 patient charts, and excluded cases of ulcerative colitis and those in whom only one of the diagnoses was present or pathology slides were unavailable. Pulmonary and gastrointestinal biopsies were reviewed for the cases included in the study. Results. Four cases were identified (2 women and 2 men, age range: 25-62). The diagnosis of CD preceded that of GPA in all cases. PR3/c-ANCA was positive in two cases, while in the other two PR3- and MPO-ANCA were both negative. Chest imaging showed pulmonary nodules in all cases. Pathology revealed features diagnostic of GPA in all cases with necrotizing granulomatous inflammation and segmental vasculitis. In addition, one case showed capillaritis. Conclusion. Pulmonary findings in patients with CD, or the presence of granulomatous colitis in patients with GPA should prompt the inclusion in the differential diagnosis of a possible coexistence of CD and GPA.