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Abstract.

Autoimmune hepatitis (AIH) is a chronic liver disease characterized by non-resolving inflammation of hepatocytes, often presenting with nonspecific symptoms. While AIH is commonly associated with elevated liver enzymes and autoantibodies, its presentation with peripheral blood eosinophilia is rare. We present a case of a 52-year-old male with AIH who exhibited severe epigastric pain, unintentional weight loss, and gastrointestinal symptoms. Diagnostic assessments revealed marked peripheral eosinophilia (19.3 x 10^9/L), elevated liver enzymes, Hypergammaglobulinemia, and positive anti-nuclear antibody (ANA) with a cytoplasmic pattern. Imaging studies demonstrated hypo-enhancing liver lesions suggestive of focal eosinophilic infiltration. A liver biopsy confirmed generalized mixed inflammatory cell infiltrate, interface hepatitis, necrosis, and fibrosis consistent with AIH (Stage 3-4). This case underscores the importance of considering AIH as a differential diagnosis in patients with unexplained peripheral eosinophilia and atypical liver findings.