Squamous metaplasia without atypia

Fig. 1 Endoscopic finding of a whitish, slightly depressed lesion in the lesser curvature of the antrum (black arrows) in an 89-year-old man presenting with a 1-month history of anemia.

Fig. 2 On microscopic examination, a biopsy specimen taken from the whitish lesion exhibits squamous metaplasia without atypia. Hematoxylin and eosin stain, ×100.

An 89-year-old man presented with a 1-month history of anemia. The results of a physical examination were normal. Diagnostic gastrointestinal endoscopy showed advanced atrophic gastritis, multiple ulcer scars, and a whitish, slightly depressed lesion 15 mm in size in the lesser curvature of the antrum (● Fig. 1). Squamous metaplasia without atypia was diagnosed based on examination of the specimen obtained from the depressed lesion (● Fig. 2).

On narrow-band imaging (NBI) of the same site, dot-like vascular structures were observed (● Fig. 3). NBI magnification indicated the presence of intra-epithelial papillary capillary loop (IPCL)-like vascular structures, reflecting the squamous epithelium, which is usually observed in pharyngeal and esophageal areas, not the stomach (● Fig. 4).

In previous reports, the endoscopic appearance of gastric squamous metaplasia has been described as that of whitish lesions [1,2]. Although the pathogenesis of the patient's squamous metaplasia was unclear, it is well documented that atrophic mucosa and ulcerative lesions are caused by chronic inflammation in the stomach. It was also considered relevant that multipotent stem cells and squa-

Fig. 3 On narrow-band imaging, the whitish depressed lesion exhibits dot-like vascular structures (white arrows).

Fig. 4 Magnified endoscopy combined with narrow-band imaging reveals intra-epithelial papillary capillary loop (IPCL)-like vascular structures.

mous metaplasia appear in the stomach during the process of ulcer healing [2,3]. We have reported this case because squamous metaplasia without atypia is rarely seen in the stomach. Moreover, the findings obtained by magnified endoscopy combined with NBI have not been reported for squamous metaplasia to date.

Endoscopy_UCTN_Code_CCL_1AB_2AD_3AF

Competing interests: None

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DOI <http://dx.doi.org/10.1055/s-0034-1393230>
Endoscopy 2015; 47: E550–E551
© Georg Thieme Verlag KG
Stuttgart · New York
ISSN 0013-726X

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