Endoscopic submucosal dissection for remnant rectal neoplasm after ileal pouch-anal anastomosis for ulcerative colitis

Restorative proctocolectomy with stapled ileal pouch-anal anastomosis (IPAA) has been a routinely performed surgical procedure for ulcerative colitis (UC); however, tumor development from the remnant rectal mucosa is problematic [1, 2]. Here, we report a case of successful endoscopic submucosal dissection (ESD) for a neoplasm arising from the remnant rectal mucosa after proctocolectomy for refractory UC (▶ Video 1).

A 64-year-old woman who underwent restorative proctocolectomy with stapled IPAA for refractory UC 16 years ago was diagnosed with a sessile neoplasm, measuring 40 mm in diameter (▶ Fig. 1a). Endoscopic submucosal dissection (ESD) was proposed as a total excisional biopsy for histopathological assessment, including background mucosa.

The rectal lumen was nonpliable owing to the surgical anastomotic suture and diffuse submucosal fibrosis, and therefore, unlike in the usual rectal ESD procedure, a vertical approach to the muscularis was required. For this, we used a multi-bending gastroscope (GIF-2TQ260M; Olympus Medical Systems, Tokyo, Japan), which offered a tangential approach to the submucosal space during a retroflex maneuver (▶ Fig. 1b). Dissection using endo-cut mode was effective, even for the severe fibrotic submucosa. Successful en bloc resection was achieved (▶ Fig. 1c,d). Histopathology revealed a tubulovillous adenoma with R0 resection (▶ Fig. 2). Immunohistochemically, the tumor was negative for p53, and no dysplastic lesion was found in the background mucosa. Thus, the lesion was diagnosed as a sporadic rectal adenoma with curative resection.

To our knowledge, this is the first report describing tumorigenesis, including sporadic neoplasm, and a detailed technique of rectal ESD after proctocolectomy for UC. Although colorectal ESD for patients with UC is usually difficult because of submucosal fibrosis and adi...
pose tissue deposition [3], successful ESD can help to avoid invasive surgery and preserve the quality of life. ESD is considered useful as a precise and minimally invasive diagnostic procedure for neoplastic lesions in patients with UC, even after proctocolectomy.

Endoscopy_UCTN_Code_TTT_1AQ_2AD

Competing interests

None

The authors

Shunsuke Yoshii, Shinichiro Shinzaki, Yoshito Hayashi, Yoshiki Tsujii, Munehiro Ashida, Hideki Iijima, Tetsuo Takehara
Department of Gastroenterology and Hepatology, Osaka University Graduate School of Medicine, Osaka, Japan

References


Bibliography

DOI https://doi.org/10.1055/a-0950-9501
Published online: 30.7.2019
© Georg Thieme Verlag KG
Stuttgart · New York
ISSN 0013-726X

ENDOSCOPY E-VIDEOS
https://eref.thieme.de/e-videos

Endoscopy E-Videos is a free access online section, reporting on interesting cases and new techniques in gastroenterological endoscopy. All papers include a high quality video and all contributions are freely accessible online.

This section has its own submission website at https://mc.manuscriptcentral.com/e-videos