

Colitis cystica profunda presenting with a mucus pool within the stalk of a pedunculated colon polyp



Fig. 1 Colonoscopy showing a 1.5-cm, pedunculated polyp in the sigmoid colon, with a bulging stalk and a mucosal bridge on the attachment of the colonic wall, implying the presence of a submucosal mass in the stalk.

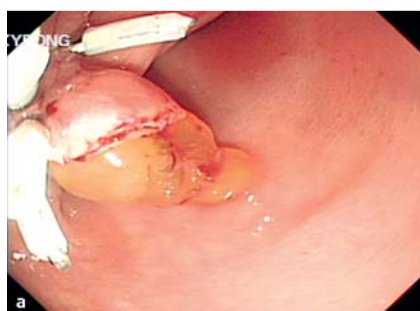


Fig. 2 a, b After endoscopic polypectomy, part of the stalk remained attached to the intestinal wall and was seen to contain a large amount of yellowish mucus.

A 38-year-old man was admitted for a colon polypectomy. A colonoscopic examination had been carried out in another hospital several days earlier due to hematochezia and a polyp had been found in the sigmoid colon. The 1.5-cm, pedunculated polyp (► **Fig. 1**) had a slight bulge in the stalk, and there was a mucosal bridge at the attachment to the intestinal wall, mimicking a submucosal tumor. The polyp was resected at the midportion of the stalk using an electrosurgical unit (ERBE VIO 300D, Elektromedizin GmbH,

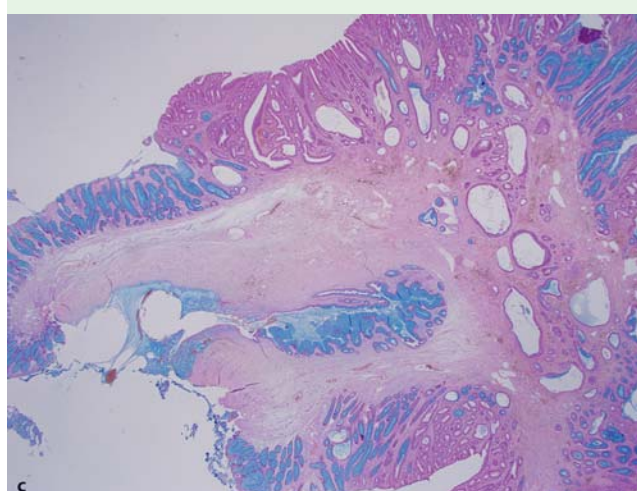
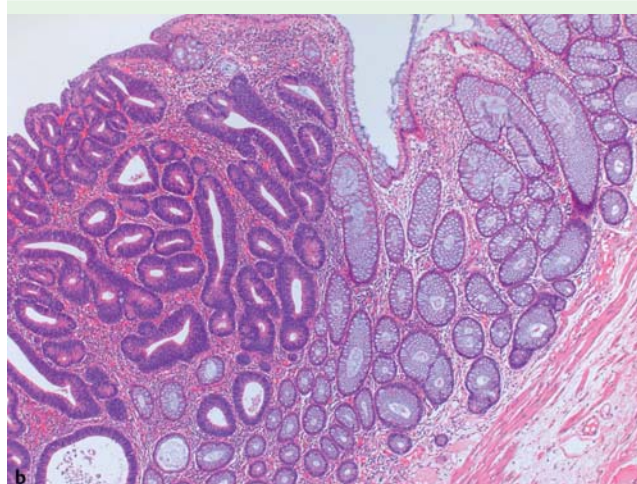
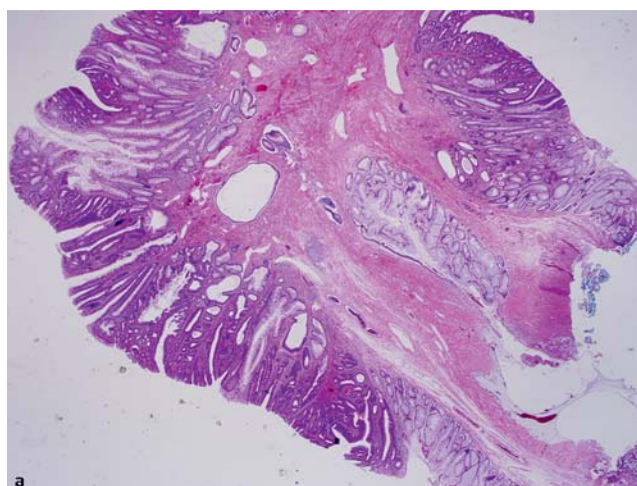


Fig. 3 a Histologically, the polyp was a mixed adenomatous and hyperplastic type. There was abundant fibrous tissue and several dilated cystic glands in the submucosa, suggesting colitis cystica profunda (hematoxylin and eosin, magnification × 10). b Typical tubular adenoma on the left and hyperplastic polyp on the right, with a distinctive transition between the two elements (hematoxylin and eosin, magnification × 40). c The dilated cystic gland deep within the stalk remnant was filled with mucin (Alcian blue stain, magnification × 12.5).

Tubingen, Germany) and snare (SD-9U-1, Olympus, Tokyo, Japan). Grossly, the resected specimen was composed of a head portion and stalk containing yellowish mucus. The remaining part of the stalk in

the intestinal wall also contained the yellowish mucus (► **Fig. 2**).

Histologic examination revealed that the polyp was a typical mixed hyperplastic and adenomatous type, composed of tu-

bular adenoma with low grade dysplasia, adjacent to which was a hyperplastic polyp (● Fig. 3a,b).

Also, there were multiple mucus-filled cysts under the muscularis mucosa. The cysts were covered with columnar epithelium and were surrounded by fibrous tissue. A large mucus pool in the epithelial lining was seen near the stalk remnant (● Fig. 3c). We speculated that the pool of mucus within the stalk stump had resulted from submucosal invasion of the epithelial gland, as seen in colitis cystica profunda.

Colitis cystica profunda is a rare disorder in which benign, epithelial-lined, mucus-filled cysts, of unknown etiology, develop in the mucosa and submucosa of the colon and form polypoid lesions [1]. The disease is rarely accompanied by adenoma. A case report of a single polypoid colitis cystica

profunda lesion accompanied by adenocarcinoma on the surface was recently published [2]. However, there has not been any report of a mucus pool within the stalk of a mixed hyperplastic and adenomatous colonic polyp, mimicking submucosal tumor, in colitis cystica profunda.

Competing interests: None

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**M. E. Jung¹, G. M. Cho¹, S. W. Byun¹,
K. R. Do¹, H. K. Kim¹, Y. S. Cho¹,
H. S. Chae¹, O. R. Shin², S. S. Kim¹**

¹ Department of Internal Medicine, Uijongbu St Mary Hospital, The Catholic University of Korea, Uijongbu, Korea

² Department of Pathology, Uijongbu St Mary Hospital, The Catholic University of Korea, Uijongbu, Korea

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Corresponding author

S. S. Kim, MD

Department of Internal Medicine

Uijongbu St Mary's Hospital

65-1 Gumoh-dong

Uijongbu City

Kyunggi-do, 480-717

South Korea

Fax: +82-31-8472719

kimss@catholic.ac.kr