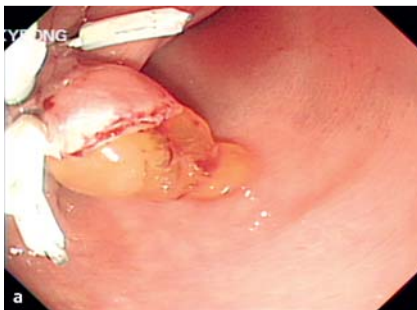


## Colitis cystica profunda presenting with a mucus pool within the stalk of a pedunculated colon polyp

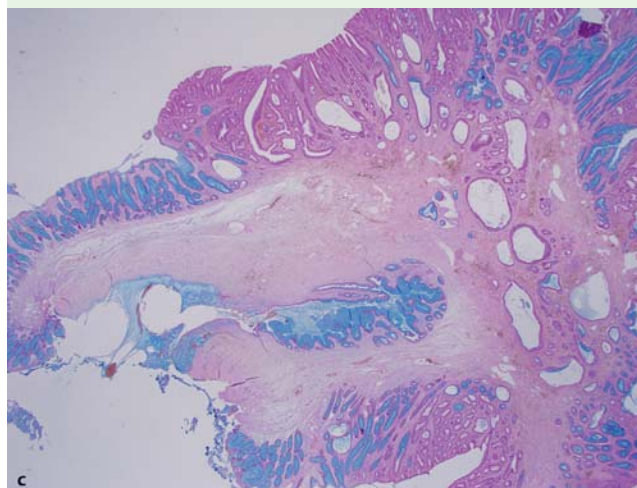
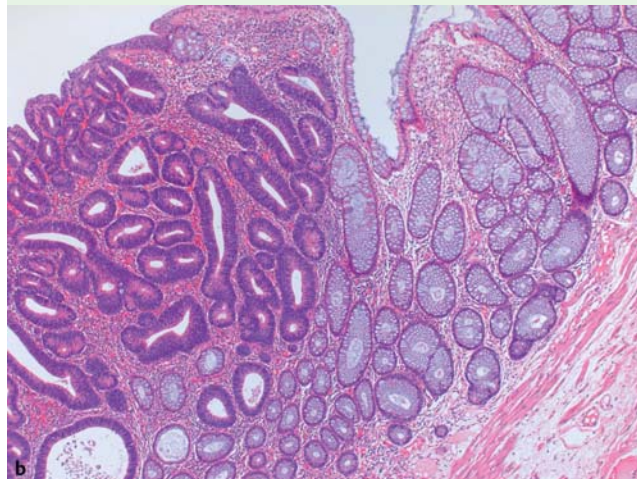
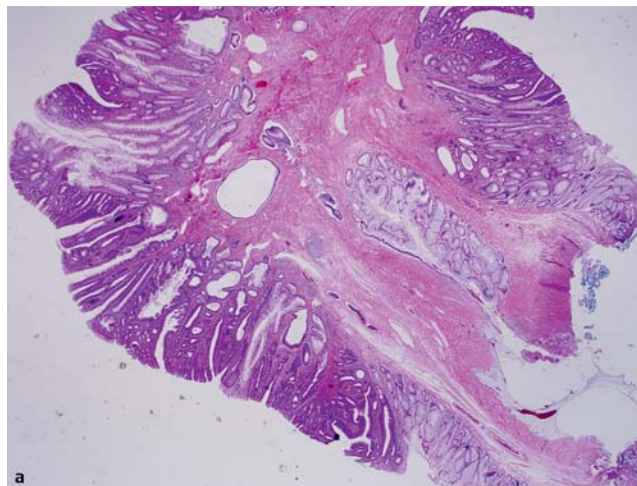


**Fig. 1** Colonoscopy showing a 1.5-cm, pedunculated polyp in the sigmoid colon, with a bulging stalk and a mucosal bridge on the attachment of the colonic wall, implying the presence of a submucosal mass in the stalk.



**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  $\times 10$ ). 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  $\times 40$ ). c The dilated cystic gland deep within the stalk remnant was filled with mucin (Alcian blue stain, magnification  $\times 12.5$ ).

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. 3 a, 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. 3 c). 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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