A giant colonic lipoma was found in a 38-year-old man who presented with hematochezia and intermittent abdominal pain. Colonoscopy revealed a submucosal tumor with ulceration (Fig. 1a). Abdominal computed tomography (CT) showed a low-density mass consistent with fat. Barium enema revealed a 75 × 45-mm broad-base mass in the transverse colon (Fig. 2a). Following these examinations a diagnosis of giant lipoma causing gastrointestinal bleeding was made. Endoscopic resection was attempted; however it was decided not to proceed because the mass was too large to allow the definitive visualization of the base of the mass. Biopsy was conducted after the mucosa overlying the tumor had been removed (5-mm diameter) using an electric snare. Histologically, only inflamed colonic mucosa was found. CT and barium enema were repeated for preoperative evaluation 1 month later; the tumor had disappeared completely (Fig. 2b). Colonoscopy showed ulceration without any tumor remnant (Fig. 1b).

Spontaneous disappearance of a giant colonic lipoma after endoscopic biopsy

Endoscopy_UCTN_Code_CCL_1AD_2AJ

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