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, but no bleeding (December 2008). 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 that the tumor had disappeared and ulceration remained without any tumor remnant (January 2009).

We speculate that the lipoma in the present case might have undergone enucleation through the damaged region of the surface mucosa following biopsy or as a result of ulceration. Alternatively, it is possible that spontaneous expulsion of the lipoma occurred as a result of ischemic change and necrosis at the base of the tumor.

Corresponding author
S. Ishiyama, MD
Department of Coloproctological Surgery
Juntendo University
2-1-1 Hongo
Bunkyo-ku
Tokyo 113-8421
Japan
Fax: +81-3-38130731
i-shun@juntendo.ac.jp

Bibliography
Endoscopy 2011; 43: E16
© Georg Thieme Verlag KG Stuttgart · New York · ISSN 0013-726X

Endoscopy_UCTN_Code_CCL_1AD_2AJ

Competing interests: None

Department of Coloproctological Surgery, Juntendo University, Tokyo, Japan

References
1 Kurahara K, Aoyagi K, Hizawa K et al. Spontaneous disappearance of a gastric lipoma after endoscopic biopsy: report of an unusual case. Endoscopy 1999; 31: S31