

Figure 1 A healthy 59-year-old man underwent colonoscopy because of a positive fecal blood test. A yellowish-white lobulated polyp, 15-mm in size with a “baby’s hand”-like morphology, was seen. Endoscopic polypectomy for suspected leiomyoma was performed without complication.

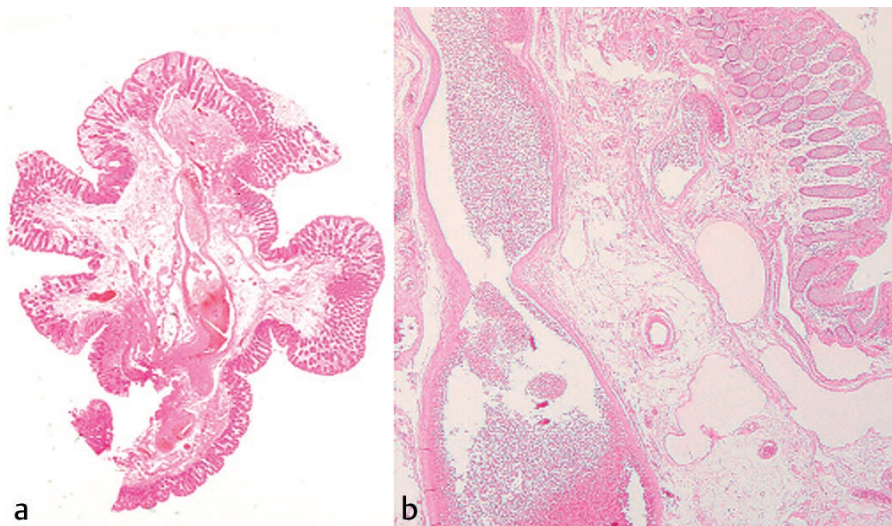


Figure 2 The edematous stroma was filled with enlarged serpiginous veins and arterioles, leading to a diagnosis of angiodysplasia. Angiodysplasia is one of the major causes of lower gastrointestinal bleeding, often encountered during emergency colonoscopy. The typical endoscopic appearance is often reported to be a

slightly elevated reddish lesion, reflecting the dilated, tortuous veins in the submucosa. Lesions having a polypoid morphology are extremely rare. This case suggests us the possibility of angiodysplasia as a polypoid lesion, and the need for care when performing biopsy or endoscopic polypectomy.

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