

[PICTURES IN CLINICAL MEDICINE]

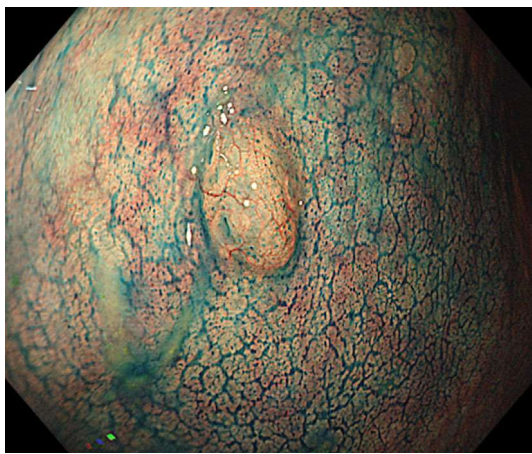
Rectal Submucosal Tumor Mimicking a Neuroendocrine Tumor

Takahiro Utsumi¹, Atsushi Yamada², Takaki Sakurai³ and Shin'ichi Miyamoto¹

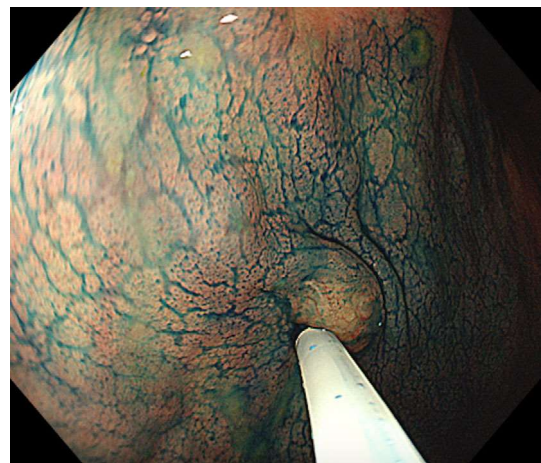
Key words: submucosal tumor, proctitis cystica profunda, neuroendocrine tumor

(Intern Med 58: 1521-1522, 2019)

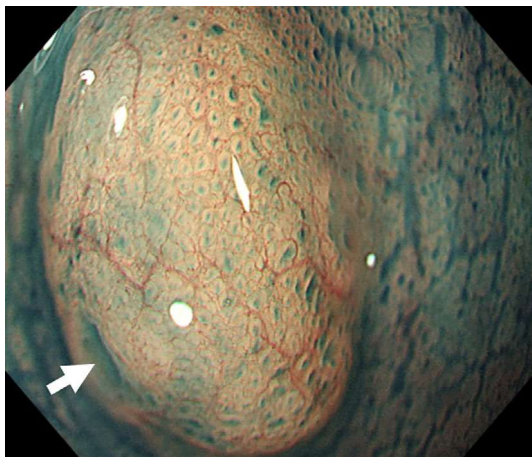
(DOI: 10.2169/internalmedicine.2171-18)



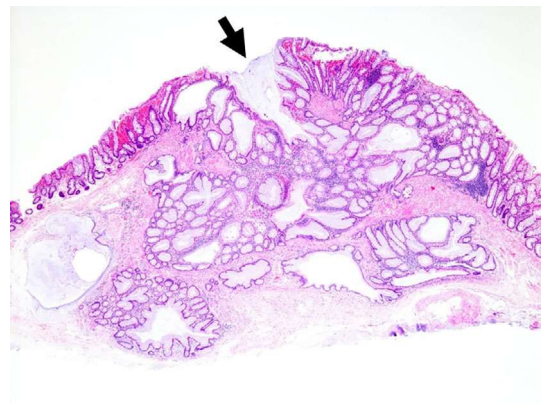
Picture 1.



Picture 2.



Picture 3.



Picture 4.

A 51-year-old woman was admitted to our hospital for endoscopic resection of colonic polyps. Colonoscopy de-

tected a 7-mm-sized, yellowish, protruding submucosal lesion in the rectum after spraying with indigo carmine dye (Picture 1). The lesion was hard and had mobility (Picture 2). Magnifying chromoendoscopy showed slightly di-

¹Department of Gastroenterology and Hepatology, Kyoto University Graduate School of Medicine, Japan, ²Department of Therapeutic Oncology, Kyoto University Graduate School of Medicine, Japan and ³Department of Diagnostic Pathology, Kyoto University Hospital, Japan
Received: September 21, 2018; Accepted: October 28, 2018; Advance Publication by J-STAGE: January 10, 2019
Correspondence to Dr. Shin'ichi Miyamoto, shmiyamo@kuhp.kyoto-u.ac.jp

lated regular vessels and a surface structure similar to the normal mucosa (Picture 3). Based on these findings, the lesion was diagnosed as a neuroendocrine tumor. Endoscopic mucosal resection was performed using a ligating device. A histologic examination revealed mucus-filled cysts and misplaced epithelium beneath the muscularis mucosa, leading to a diagnosis of proctitis cystica profunda (1) (Picture 4). When we retrospectively reviewed the endoscopic images, an enlarged pit was recognized (Picture 3, arrow). This finding may correspond to the site where the epithelium had grown into the submucosa (Picture 4, arrow). This case will contribute to the differential diagnosis of small, yellowish submucosal tumors in the rectum.

The authors state that they have no Conflict of Interest (COI).

Reference

1. Ayantunde AA, Strauss C, Sivakkolunthu M, Malhotra A. Colitis cystica profunda of the rectum: an unexpected operative finding. *World J Clin Cases* 4: 177-180, 2016.

The Internal Medicine is an Open Access journal distributed under the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License. To view the details of this license, please visit (<https://creativecommons.org/licenses/by-nc-nd/4.0/>).