Endoscopic Submucosal Dissection for Gastric Arteriovenous Malformation

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Picture 1.
An 87-year-old man consulted our hospital with hematemesis. Esophagogastroduodenoscopy revealed the presence of a submucosal tumor with a small ulcer in the antrum (Picture 1). Contrast-enhanced computed tomography revealed a stained nodular structure (Picture 2a and b). Endoscopic ultrasound showed a low-echoic area in the submucosal layer. An echo-free area was connected with dilated blood vessels on the deeper side (Picture 2c and d). Its color and shape was not typical of a hemangioma. It was therefore diagnosed to be arteriovenous malformation (AVM) for the preoperative diagnosis. Because the lesion was localized in the submucosal layer, endoscopic submucosal dissection (ESD) was selected for the treatment. A feeding blood vessel was cauterized and incised with hot biopsy forceps (Picture 3). Histopathologically, an irregular, nontumorous arterial/venous outgrowth was observed, suggesting AVM (Picture 4). Gastric AVM is relatively rare (1) and it may sometimes cause digestive tract hemorrhage (2). This is the first report in which ESD was selected to treat gastric AVM.

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

References


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