A Reddish Submucosal Tumor after Nephrectomy

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A 64-year-old woman presented with hemorrhagic stool 2 years after left radical nephrectomy for clear cell renal cell carcinoma (ccRCC; pT2N0M0). Abdominal enhanced computed tomography revealed a hypervascular tumor at the descending colon (Picture A). Colonoscopy showed a reddish mass resembling a submucosal tumor (SMT) at the descending colon, with ulceration on the top of the tumor (Picture B). A biopsy showed clear cell carcinoma. The patient underwent left hemicolectomy. The resected specimen showed SMT-like tumor ulceration (Picture C). A histopathological examination revealed clear cell carcinoma of renal origin (Picture D). Positive CD10 staining was identified. Recurrence of ccRCC in the solitary descending colon is extremely rare (1). A previous study investigated 1,173 autopsy reports of patients with RCC and reported intestinal involvement in 9% of cases; however, none were solitary metastasis (2). The typical colonoscopic appearance is a reddish SMT with or without ulceration (1, 2). Endoscopic images may assist physicians with an appropriate diagnosis.

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Picture.
References


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