Rectal Submucosal Tumor Mimicking a Neuroendocrine Tumor

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A 51-year-old woman was admitted to our hospital for endoscopic resection of colonic polyps. Colonoscopy detected 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 dilated blood vessels (Picture 3). Histologically, the lesion was composed of uniform, small cells with pale nuclei and eosinophilic cytoplasm (Picture 4).

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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.

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Reference


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