A 61-year-old female with a positive fecal occult blood test was referred to our hospital to undergo screening colonoscopy. Colonoscopy identified a sessile protruded polyp in the rectosigmoid junction, measuring approximately 5 mm in diameter, whose colonic crypt displayed a serrated architecture (Picture 1). Since the lesion was diagnosed to be a hyperplastic polyp, it was therefore resected by endoscopic mucosal resection. On histological examination, spindle cells without atypia proliferated like a node in the lamina propria (Picture 2). Considering the results of immunohistochemical staining (1), the lesion was diagnosed as perineurioma (Picture 3). We herein present an atypical case of perineurioma mimicking a colonic hyperplastic polyp. Perineurioma is an uncommon polyp predominantly located at the distal colon and rectum. Although perineurioma are regarded as benign, the possibility of a BRAF mutation was reported in a serrated colonic crypt epithelium (2). To reveal the molecular basis and long-term outcomes of perineurioma, follow-up endoscopic examinations and the accumulation of the further cases are called for.
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References