

Gastrointestinal and Liver Pathology at Rush

1750 W. Harrison St., Suite 570, Chicago, IL 60612 ♦ (312) 942-5227 phone ♦ (312) 942-4228 fax

Case of the Month Question – January 2009

Contributed by Drs. Maria McIntire and Shriram Jakate

A 62-year-old woman with a history of diabetes and hypertension presented for shortness of breath and volume overload. During her hospitalization, she developed upper GI bleeding and underwent an ultrasound endoscopy. There were approximately fourteen polyps seen in the stomach ranging from 1-4 cm, four of which were actively bleeding. On ultrasound imaging, all were limited to the mucosa and submucosa. All were removed by snare cautery. Figures 1 and 2 show a representative polyp.

Figure 1. (hematoxylin and eosin stain, 40x magnification).

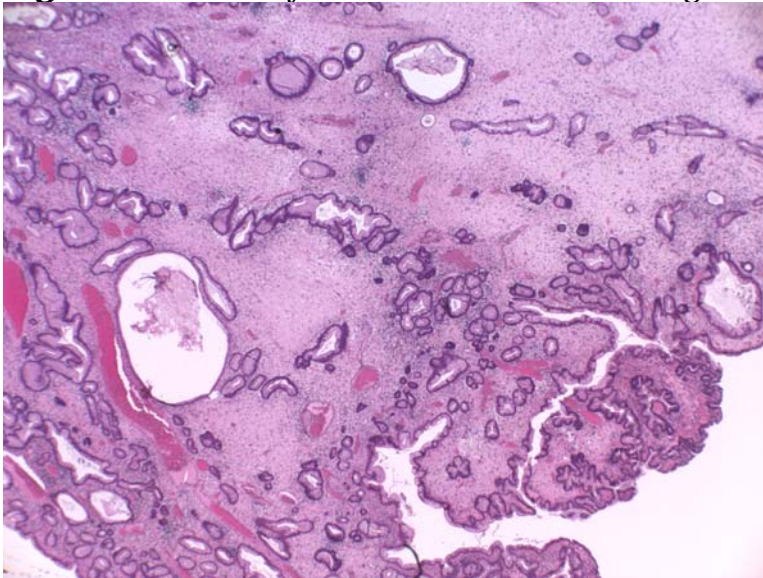


Figure 2. (hematoxylin and eosin stain, 200x magnification).

