

Gastrointestinal and Liver Pathology at Rush

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Case of the Month Question – November 2009

Contributed by Drs. Luis Blanco Jr. and Shriram Jakate

A 44 y/o male with a history of hypertension and diabetes presented to the clinic with gastroesophageal reflux disease (GERD). Physical examination was unremarkable. Upper endoscopy showed a single pedunculated polyp in the duodenal bulb measuring 10 to 20 mm (Fig. 1). Endoscopic ultrasound demonstrated a submucosal lesion (Fig. 2). A snare resection was performed and histology showed a submucosal growth of benign glands admixed with adipose tissue and fibrovascular connective tissue. (Fig. 3).

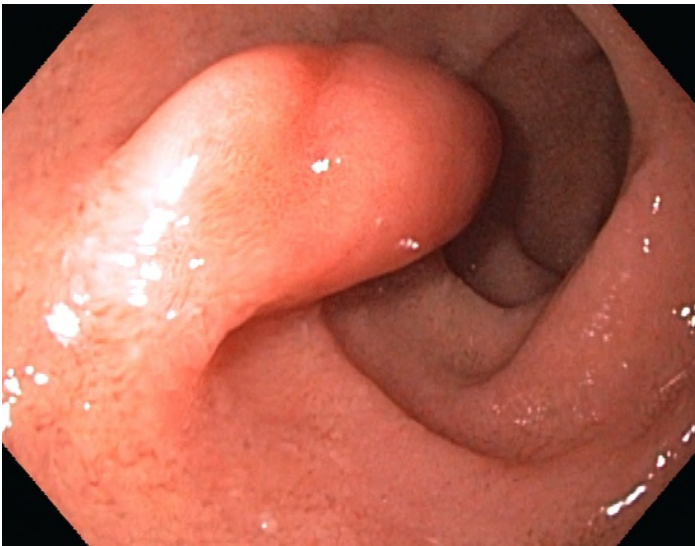


Fig. 1 Endoscopy of the duodenum.



Fig. 2 Endoscopic ultrasound of the duodenum.

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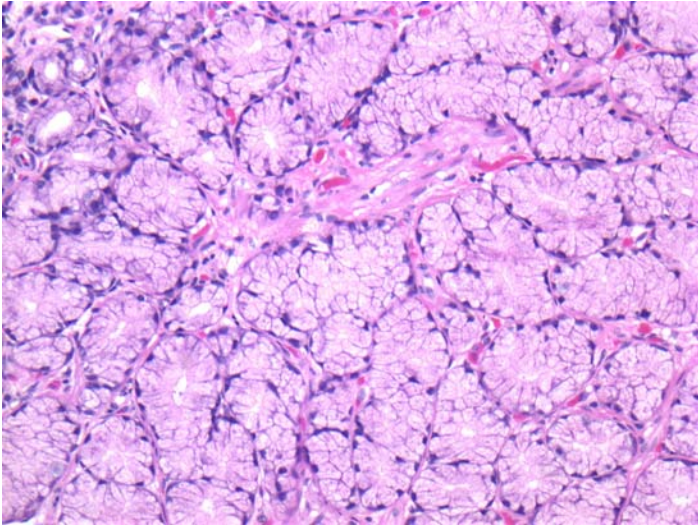


Fig. 3 Microphotograph of the polyp.