Clinical Image

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Particular endoscopic presentation of multiple gastric ECLomas

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Keywords: ECLoma; gastric neuroendocrine tumors; biermer's disease; hypergastrinemia.

Clinical-medical image

66-year-old woman with no significant pathological history is admitted for etiologic assessment of anemia. It is an iron deficiency microcytic anemia with hemoglobin at 9.8g/dL. An upper digestive endoscopy showed multiple fundic polypoid lesions of variable size measuring more than 10mm, including a subcardial lesion measuring 20mm (Figure 1&2). With the presence of other antrals centimetrics polypoids lesions. The anatomopathological examination of the lesions is in favor of ECL (enterochromaffin like) cell carcinoids. Fundic biopsy revealed fundic atrophy consistent with Biermer's disease. The biological assessment showed a collapsed vitamin B12 level with the presence of anti parietal cell antibodies. The treatment is based on injectable iron infusions, vitamin B12 injections and taking proton pump inhibitors. supracentimetric polypoid lesions were resected endoscopically with regular endoscopic control of other small lesions.

Gastric neuroendocrine tumors form a heterogeneous group, very largely dominated by tumors derived from so-called enterochromaffin-like (ECL) cells, endocrine cells specialized in the secretion of histamine and located within the fundic mucosa, at the deep part of the glands [1]. The vast majority of ECL cell tumors occur in a context of hypergastrinemia. It is most often a hypergastrinemia secondary to achlorhydria induced by chronic atrophic gastritis affecting the fundic mucosa (especially in the context of Biermer's disease).

Endoscopically, gastric neuroendocrine tumors appear as multiple small polypoid lesions of less than 1 cm in size. Therapeutically, simple monitoring is recommended for ECLomas < 1 cm in size. In case of size > 1 cm, an endoscopic mucosectomy is sufficient if the submucosa is undamaged. Otherwise, ECLomas are treated by local resection associated with antrectomy.

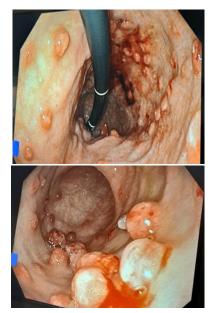


Figure 1 and 2: An upper digestive endoscopy showed multiple fundic polypoid lesions of variable size measuring more than 10mm, including a subcardial lesion measuring 20mm.

Declaration of Conflicting Interests

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