Obscure digestive bleeding

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Introduction

A 50-year-old woman presented to the emergency department with several episodes of melena in the last week. The patient was not hemodynamically compromised and was conservatively managed. Urgent upper gastrointestinal endoscopy and colonoscopy showed no source of bleeding. Abdominal CT demonstrated three mural nodular lesions up to 2cm in the mid jejunum with hypervascular characteristics in arterial phase without active bleeding in venous phase. Angiography (Figure 1A) revealed three tumours with neo-angiogenesis and no active bleeding. Each lesion was stained with methylene blue and followed by embolization with coils. Exploratory laparotomy (Figure 1B) showed the three nodules marked by angiography. Intestinal resection of the affected segment was performed. Histopathological study proved the diagnosis of suspicion (Figure 2).

What is the diagnosis?

Type 1 neurofibromatosis (NF1) is a genetic disease characterized by neoplastic and not neoplastic disorders. Histopathological study was consistent with gastrointestinal stromal tumour (GIST) with a low replication index. Gastrointestinal stromal tumors (GIST) are rare tumors of the digestive tract, with an incidence of about 1.5 per 100,000/year, can be present in NF1 (1).

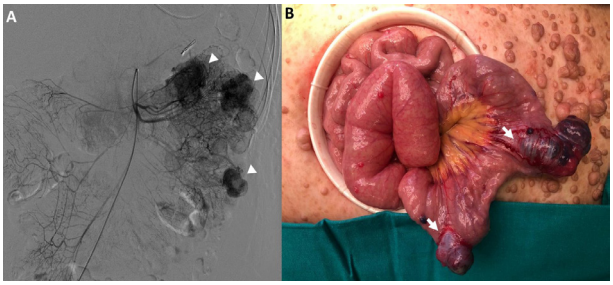

Figure 1. — 1A: Angiography identifies three hypervascular lesions depending on jejunal branches and no active bleeding (arrowhead). 1B: Intraoperative photograph. Surgery reveals the nodular lesions marked with methylene blue previously with angiography (arrow). Note numerous cutaneous neurofibromas.

In case of gastrointestinal bleeding of obscure origin, angiography with staining and embolisation may be part of the diagnostic process in these patients, followed by surgical approach.

Conflict of interest

None. The authors declare that they have no competing interests.

References

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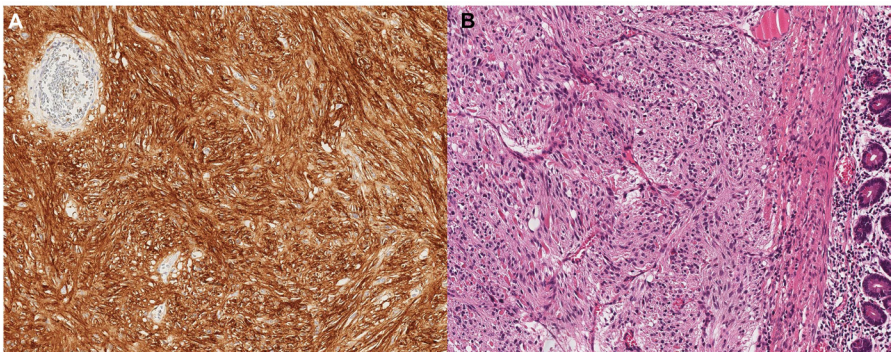

Figure 2. — 2A: Stomach gastrointestinal stromal tumor: CKIT (CD117) diffuse and positive staining (IHQ, 40x). 2B: The lesion is composed of spindle cells with elongated nuclei and eosinophilic cytoplasm in a syncytial pattern, arranged in fascicles (H and E, 40x).

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