Gastroduodenal nodules in a HIV positive patient: don’t forget the skin!

T. Düzenli, M. Kiyak
SBU Sancaktepe Şehit Prof.İlhan Varank Training and Research Hospital, Department of Gastroenterology, Istanbul, Turkey.

Question
A 35-year-old male with a history of HIV infection presented in our department for endoscopy with the complaints of dyspepsia and epigastric pain. Endoscopy revealed flat, maculopapular, reddish or purplish patchy nodular lesions, with different sizes and shapes, involving both the duodenum and stomach (Figure 1 A-B). There was no sign of complications such as hemorrhage, perforation or obstruction. Physical examination revealed that the patient had also purple patchy cutaneous lesions (Figure 2).

What is the diagnosis?

Answer
Histological assessment from the maculopapular and nodular lesions in endoscopic and cutaneous biopsies revealed the diagnosis as Kaposi sarcoma (KS).
KS is a low-grade vascular tumor caused by human herpes virus type 8. KS manifests primarily as a cutaneous disorder, with visceral involvement considered to occur subsequently. Gastrointestinal involvement of KS is rare and most commonly clinically silent. AIDS-related KS that is the most common form of KS in the USA and Europe and the most common malignancy in patients with AIDS. GI involvement by KS is a rare endoscopic finding, still scarcely characterized in the literature (1). In conclusion, involvement of the gastrointestinal tract by KS is often asymptomatic, has multiple endoscopic appearances, and a high diagnostic suspicion is needed in this setting.

Authors’ contributions
T.D. and M.K. the concept and design of the study; T.D. and M.K. data acquisition; T.D. drafted the manuscript, T.D. and M.K. revising critically for important intellectual content, T.D. and M.K. final approval of the version to be published.

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Conflict of Interest
The authors declare that they have no conflict of interest.

Figure 1. — Flat, maculopapular, reddish or purplish patchy nodular lesions, with different sizes and shapes, involving both the duodenum (A) and stomach (B).

Figure 2. — Purple patchy cutaneous lesions of the patient.

Reference