CASE REPORT

We present a case of a 40-year-old woman complaining of prostration and postprandial feeling of epigastric fullness for two months. She reported vertigo and dark stools for two years and was admitted with anemia (Hb=9/dl Ht=27%). Endoscopy detected a large protruding mass in the gastric body with extensive ulceration and blood clots on gastric mucosa. The ulcerated lesion was suspected to be malignant and was classified as Bormann I and hemorrhagic (Forrest IB). Multiple biopsies were performed on ulcer margins and bleeding points were treated by alcohol injection. Microscopic analysis of the first biopsy was negative for malignancy and an emergency partial gastrectomy was performed. The examination of the surgical specimen revealed a 6-cm polypoid, well circumscribed submucosal tumor, which exhibited a cut surface of typical fat tissue (Figures 1 and 2). The polyp apex exhibited a 3-cm ulceration (Figure 3). The microscopic analysis confirmed the benign nature of the lesion leading to the final diagnosis of gastric lipoma.

DISCUSSION

Lipomas are benign mesenchymal tumors that may arise from virtually any organ. They are common in soft tissues and are considered the second most frequent benign neoplasia from gastrointestinal tract. Only 5% of gastrointestinal lipomas are found in the stomach. They may progress to large masses leading to dyspeptic symptoms and 53% of all cases may be associated with bleeding.
which can be massive in about a half of cases described until 1965\(^1\). In recent literature gastric lipomas may be sufficiently large to present as acute gastrointestinal bleeding \(^2\).

The present report describes a rare behaviour of an unusual gastric benign tumor highlighting its potential life threatening course that lead to clinical/endoscopic suspicious of malignancy.

Correspondência:

Daniel Athanazio
Departamento de Biointeração - ICS - UFBA
Av. Reitor Miguel Calmon s/no - Campus do Canela
40.110-100 Salvador
Bahia - Brasil
Tel.: +55 71 3245 8602
e-mail: daa@ufba.br

REFERENCES