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### Case 1

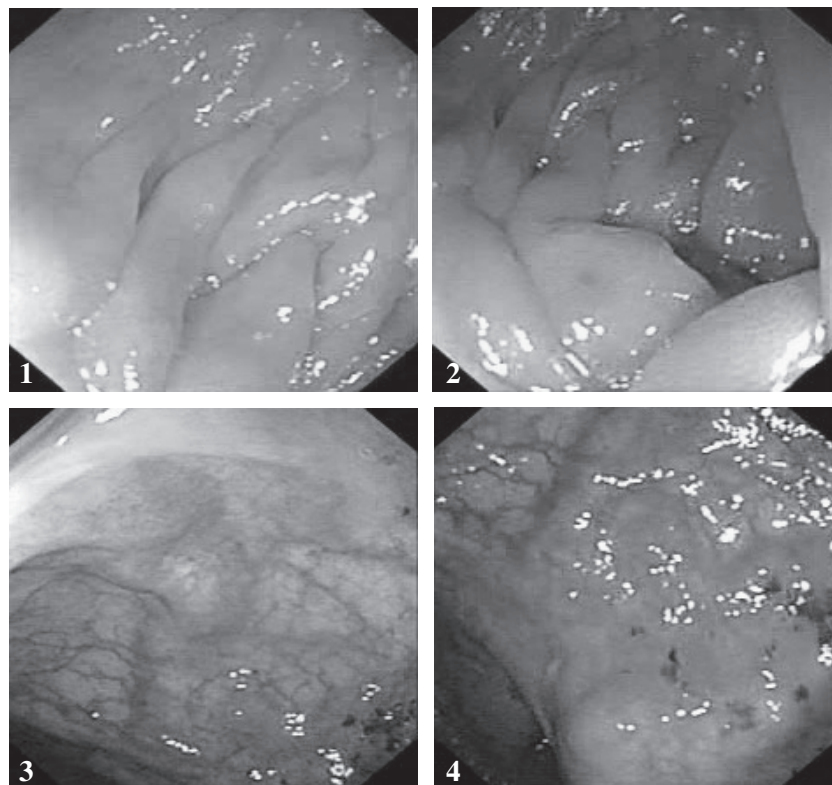
A 15-year old male patient, with a history of hematochezia for 1 month.

**Figure 1, 2** Colonoscopy revealed diffuse hydropic swelling with mild inflammation of colonic mucosa lying as mosaic-like pattern. From these figures, what is the most likely diagnosis?

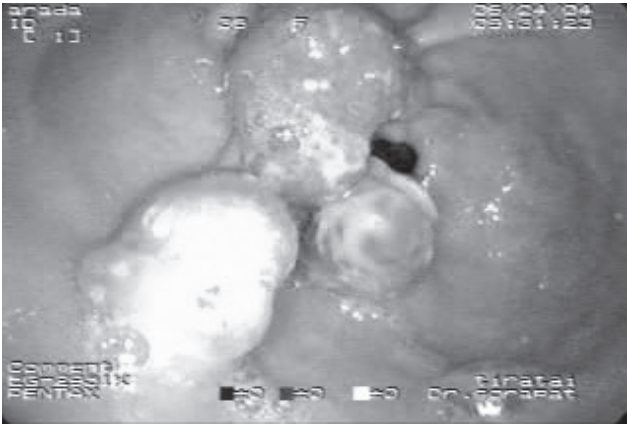
**Figure 3, 4** Colonoscopy revealed bluish, dilated, tortuous submucosal vessel of colonic mucosa. From these figures, what is the most likely diagnosis?

### Portal Hypertensive Colopathy

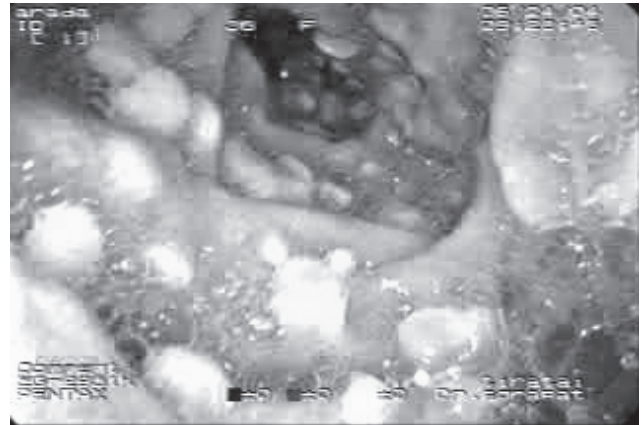
- Associated with colonic vascular ectasia
  - Arterial spider like
  - Angiodysplasia like
  - Cherry red spot like
  - Multiple lesions, most located at left- sided colon
- Not related to severity of cirrhosis, HVP, EV, PHG or glucagon level



**Figure 1, 2** The diagnosis was portal hypertensive colopathy.  
**3, 4** The diagnosis was colonic varices.



**Figure 5** Gastroscopy revealed a few erythematous sessile polyps in the antrum, 0.5-1 cm. in diameter.



**Figure 6** Gastroscopy revealed multiple sessile polyps in the second part of duodenum, 0.3-0.5 cm. in diameter. From these figures, what is the most likely diagnosis?

### Colonic Varices

- Most common site is rectosigmoid region
- Bluish, dilated, tortuous submucosal vein
- Not related to severity of cirrhosis, HPVG

### Case 2

A 35-year old, with annual surveillance endoscopy. The gastroscopy findings were shown in figure 5, 6.

**Case 2:** The diagnosis was Peutz-Jeghers syndrome.

#### Peutz-Jeghers Syndrome

- Unusual inherited GI hamatomatous polyposis

sis syndrome associated with mucocutaneous pigmentation.

- Autosomal dominant
- Skin lesion : Black pigmented spot on the lip and inside the mouth
- GI polyposis
  - Manifest early in life (average age in male = 22 years, female = 26 years)
  - Common location : small bowel > large bowel, stomach
  - Small and large bowel : pedunculated polyp
  - Stomach : sessile polyp
- Increased risk of malignancy : GI, GU, breast, pancreas, thyroid, MM, skin