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A Strange Benign Lesion of the Esophagus: Benign Bizarre Stromal Cell Polyp

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Clinical Image

A 63-year old patient who underwent previously colectomy for colonic adenocarcinoma presented with gastric pain. Upper endoscopy showed a pediculed esophageal polyp measuring 6 mm. Polypectomy was performed. On histological examination, esophageal mucosa was ulcerated with many atypical, large, discohesive cells in the lamina propria. Nuclei were pleomorphic, sometimes multiple, with prominent eosinophilic nucleoli. They were intermingled with many granulocytes and plump vessels, in a background of granulation tissue. Immunohistochemical study showed only positivity with vimentin (Figures 1 and 2). All the other markers were negative (pancytokeratin, CK7, CK20, EMA, S-100, CLA, HMB45, CD31, FactXIII a, AML, CD-1a, CMV). Ki67 showed a low proliferative index.

The diagnosis made was a benign bizarre stromal cell polyp of the esophagus. History of colonic adenocarcinoma made the diagnosis of this stromal bizarre polyp difficult and the main differential diagnosis was metastases ruled out with immunohistochemistry.

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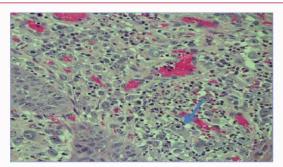


Figure 1: Pleiomorphic nuclei with proeminent eosinophilic nucleoli (arrow).

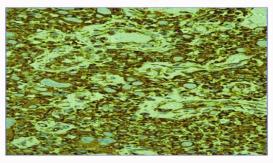


Figure 2: Immunohistochemical study with positivity of vimentin.

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