A rare cause of gastrointestinal hemorrhage: ileal gastrointestinal stromal tumor

Gastrointestinal kanamanın nadir bir sebebi: İleal gastrointestinal stromal tümör

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A 34 year-old man was admitted to our hospital with acute onset of rectal bleeding. He had no history of any disease, medications or other symptoms. His vital signs were within normal limits. Physical examination and digital examination were unremarkable. Hemoglobin level was 10 g/dl on admission and this went down to 6 g/dl on 2 days. A total of 10 units of blood transfusion were given to the patient. Colonoscopy was unremarkable, but it revealed fresh blood coming from a proximal source. Following upper endoscopy was normal. Angiography, scintigraphy, capsule endoscopy and enteroscopy could not be performed due to the absence of these opportunity in our hospital. Hence, an abdominal computed tomography scan was performed, on which was detected an ileal mass (Figure 1) and then therapeutic and diagnostic explorative laparotomy decided. At laparotomy, a mass with 6 cm in diameter originated from ileum was detected (Figure 2). The mass was surgically removed and an end-to-end anastomosis was carried out. Histopathological and immunehistochemical examination revealed gastrointestinal stromal tumor (GIST) with clear resection margins and CD117 positive staining.

GIST is the most common mesenchymal tumor in the gastrointestinal (GI) tract. The most common clinical presentation of GIST is GI bleeding (1). To date, several cases of ileal GIST that presented with overt GI hemorrhage have been reported (2, 3). We report an unusual case of an ileal GIST that presented with an acute severe GI hemorrhage, as well. However, our report highlights the diagnostic importance of an abdominal computed tomography in the absence of angiography, scintigraphy, capsule endoscopy and enteroscopy.



Figure 1. An ileal mass on abdominal computed tomography.



Figure 2. At laparotomy, a mass with 6 cm in diameter originated from ileum was detected.

References

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