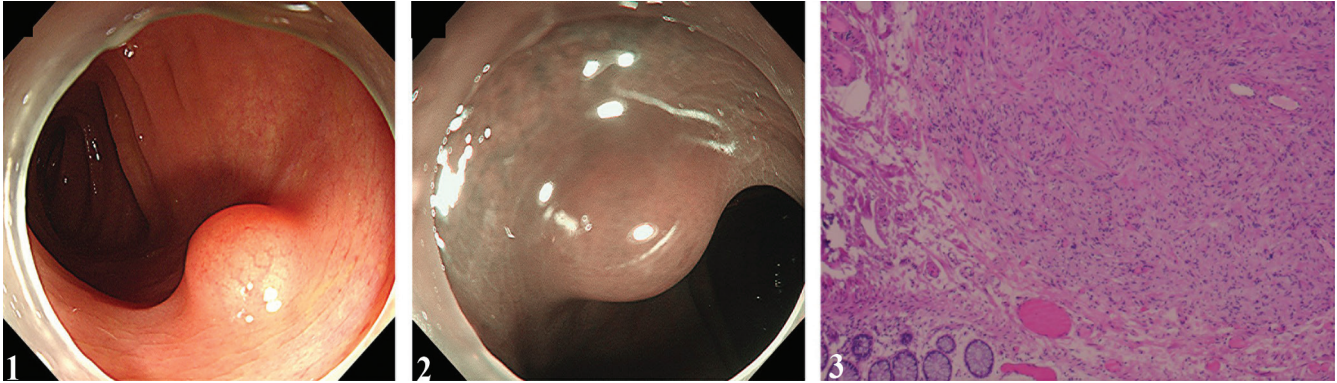


A Rare Cause of Colonic Mass: Schwannoma

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A 31-year-old man was referred to our hospital after colonoscopy revealed a six-millimeter submucosal bulge in his sigmoid colon located 16 cm from the anus (white light imaging: Fig. 1 and narrow band imaging: Fig. 2). The patient had intermittent left lower abdominal pain for more than five years. Physical examination revealed tenderness in the left lower abdomen but no rebound pain. The laboratory findings were unremarkable. Computed tomography of the chest, abdomen, and pelvis revealed no obvious space-occupying lesions. The submucosal bulge was considered a neuroendocrine tumor (NET) based on endoscopic ultrasonography findings. The patient underwent endoscopic submucosal dissection (ESD) under general anesthesia. However, subsequent histopathological examinations of the resected specimen revealed a schwannoma (Fig. 3) with negative vertical margins under microscopy. Immunohistochemical results were as follows: SMA(-), DESMIN(-), S-100(+), CD34(-), CD117(-), and DOG-1(-). The patient was discharged on postoperative day 2 and followed up for eight months without recurrence.

Gastrointestinal schwannoma is a rare submucosal tumor of the gastrointestinal tract that is benign in most cases [1]. Postoperative pathology is the gold standard for its diagnosis. This disease, which has diverse and non-specific

clinical manifestations, is common in middle-aged women. It is difficult to distinguish it from submucosal tumors such as NETs and stromal tumors under endoscopy, and its malignant tendency increases as the tumor grows larger [2-3]. Endoscopic resection is recommended for tumors measuring <3 cm without serosal invasion, with less trauma and no recurrence.

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REFERENCES

1. Bohlok A, El Khoury M, Bormans A, et al. Schwannoma of the colon and rectum: a systematic literature review. *World J Surg Oncol.* 2018;16:125. doi:[10.1186/s12957-018-1427-1](https://doi.org/10.1186/s12957-018-1427-1)
2. de Armas Conde M, Soto Sánchez A, Hernández Barroso M, et al. Sigmoid colon schwannoma simulating colon cancer. *Rev Esp Enferm Dig.* 2022;114:499-500. doi:[10.17235/reed.2022.8684/2022](https://doi.org/10.17235/reed.2022.8684/2022)
3. Gulati R, Hanson JA, Parasher G, et al. Getting the gist of a schwannoma. *Gastrointest Endosc.* 2020;91:191-2. doi:[10.1016/j.gie.2019.07.027](https://doi.org/10.1016/j.gie.2019.07.027)