

8 IATROGENIC PER-POLYP HEMATOMA MIMICKING ARTERIOVENOUS MALFORMATION

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We report the case of a 8-year old child, previously healthy, who underwent endoscopic evaluation for rectal bleeding since 2 months. Colonoscopy was performed with progression to the last ileal loop with no polyp seen while progressing. During the procedure, when ileum was being visualised the patient had self-limited rectal bleeding, with stable vital signs. On withdrawal in the sigmoid colon, 22 cm from the anal margin, we observed a big area of bluish mucosa, non pulsatile, with no clots or signs of active bleeding and not bleeding of being probed by a forceps. There was enhancement by NBI – narrow band imaging and was surrounding a big polyp (>20mm), with a long pedicle. The appearance of the bluish mucosa prompted an assessment for arteriovenous malformation, the Doppler ultrasonography was not suggestive. Consequently, the polyp was excised and a hemostatic clip put in place. The anatomopathological examination was suggestive of a juvenile polyp.

Conclusion: The diagnosis of vascular malformation was initially evoked, however, our finding was probably a submucous haematoma originating from the shear stress on the polyp, probably exerted by the progression of the endoscope. The appearance of a bluish hematoma like lesion which is isolated and seen on withdrawal of the colonoscope but not while progressing inwards should raise the possibility of an iatrogenic hematoma.

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