

[PICTURES IN CLINICAL MEDICINE]

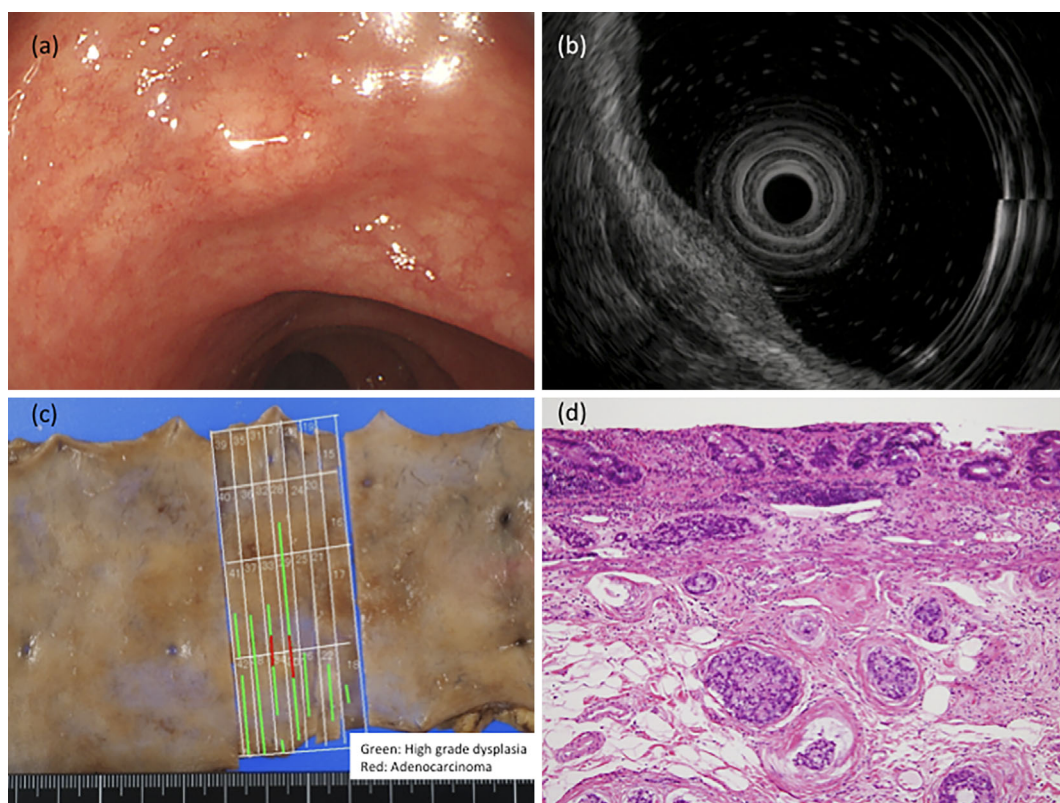
Ulcerative Colitis Associated with a Mixed Neuroendocrine-non-neuroendocrine Neoplasm

Hideaki Kinugasa, Sakiko Hiraoka, Shohei Oka and Hiroyuki Okada

Key words: ulcerative colitis, neuroendocrine tumor, MiNEN, MANEC

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Picture 1.

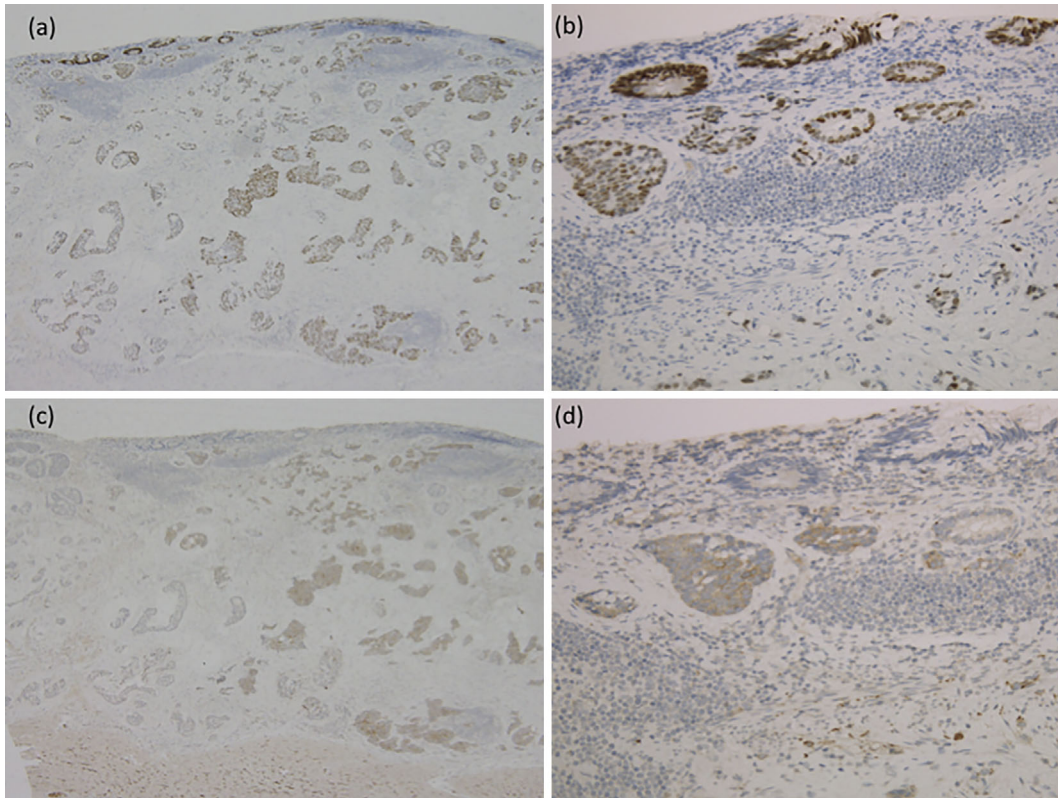
A 50-year-old man with a 25-year history of left-sided ulcerative colitis (UC) with mild activity was admitted for surveillance colonoscopy. Colonoscopy indicated a 10-mm diameter submucosal tumor in the rectum (Picture 1a). Endoscopic ultrasound showed hypoechoic lesions in the second and third layers corresponding to a neuroendocrine tumor (Picture 1b). Laparoscopic colectomy with ileal pouch anal anastomosis was performed because an endoscopic biopsy suggested not only neuroendocrine carcinoma but also high-

grade dysplasia as a UC-associated neoplasia. A histological examination with Hematoxylin and Eosin staining showed high-grade dysplasia in the epithelium and large-cell neuroendocrine carcinoma within the lamina propria (Picture 1c, d). Immunohistochemical staining revealed that p53 was positive for high-grade dysplasia (Picture 2a, b) and synaptophysin was positive for neuroendocrine carcinoma (Picture 2c, d). The proliferative marker Ki67 was positive in about 50% of the neoplastic cells. We ultimately made

Department of Gastroenterology and Hepatology, Okayama University Graduate School of Medicine, Dentistry, and Pharmaceutical Sciences, Japan

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Correspondence to Dr. Hideaki Kinugasa, gyacy14@gmail.com



Picture 2.

the diagnosis of UC associated with a mixed neuroendocrine-non-neuroendocrine neoplasm (MiNEN) based on these findings (1, 2).

The authors state that they have no Conflict of Interest (COI).

References

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neuroendocrine-non-neuroendocrine neoplasms. *Neuroendocrinology* **105**: 412-425, 2017.

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