

Is Solitary Rectal Ulcer Syndrome Uncommon in Saudi Arabia?

Sir,

Solitary rectal ulcer syndrome (SRUS) is a chronic, benign disorder affecting the rectum. It is often related to straining or abnormal defecation. It is an underdiagnosed disorder, especially in the Middle East. The data on clinical and endoscopic spectrum of SRUS is scarce. The prevalence is estimated to be 1:100,000 persons per year.^[1]

We read with interest the article on SRUS by AlGhulayqah *et al.* recently published in your journal.^[2]

In our opinion, the study did not reflect the true picture of SRUS in Saudi Arabia. The authors used pathology specimens for case identification. Depending only on histopathology will not provide the whole picture of the disease and might lead to missing some cases. An accurate diagnosis of SRUS is more commonly made based on a combination of symptoms, endoscopic findings, and histological appearances.^[3]

Histological analysis is considered to be a cornerstone for diagnosing SRUS, and without histologic evaluation an accurate diagnosis is not possible. Endoscopy findings are very important in supporting the diagnosis.^[3,4] In a study of 98 patients with a final clinicopathologic diagnosis of SRUS, an incorrect diagnosis was made in more than 25% of the patients with a median duration of incorrect diagnosis of 5 years, which was primarily the result of inadequate tissue specimens and failure to recognize the diagnostic histopathologic features of SRUS.^[1]

In addition, conducting the study in a tertiary care center contributed to delay in presentation of SRUS cases described

in this study, because in such study settings, it is likely that the SRUS cases will be limited mostly to the referred cases. Secondary care centers would have been a better setting for early diagnosis and case recruitment.

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Conflicts of interest

There are no conflicts of interest.

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