

# Endoscopic Management of a Rare Inflammatory Granulation Polyp Inside a Diverticulum

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## ABSTRACT

- Granulation polyps arising from a diverticulum are rarely reported
- Difficult to distinguish from malignant lesions as they are friable and typically covered with exudates
- Endoscopic management is challenging as there is increased risk of perforation and bleeding
- Cold biopsy forceps was used to remove the polyp in a piecemeal fashion. However, endoscopic mucosal resection with clip placement is recommended.

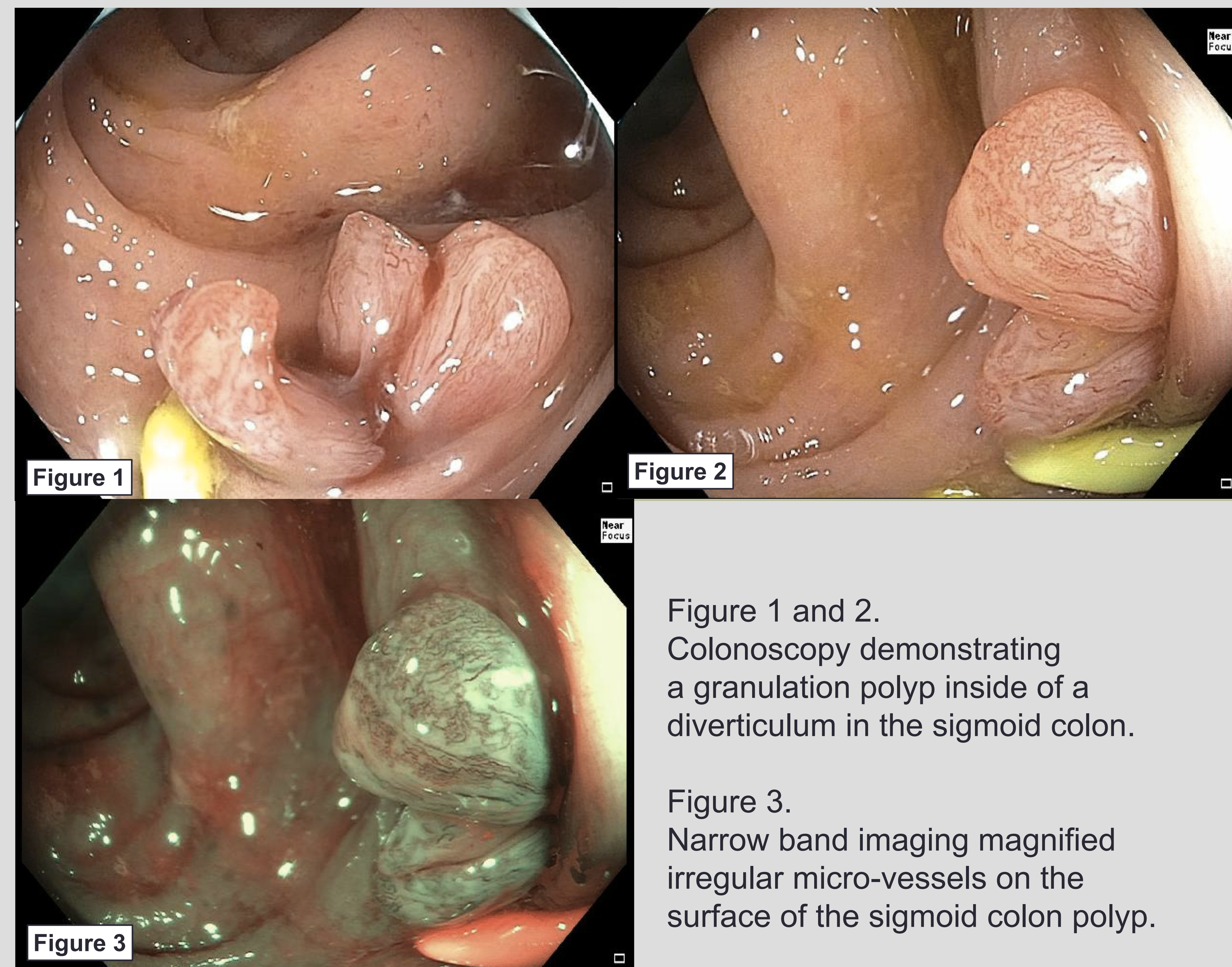
## INTRODUCTION

- Inflammatory granulation polyps are benign, and observed in the setting of recurrent inflammation such as inflammatory bowel disease (IBD) or diverticulitis
- They are difficult to distinguish from malignant lesions during endoscopic examination
- Endoscopic management can be difficult as they tend to bleed easily with increased risk of perforation as they arise within a diverticulum
- We present a rare case of an granulation polyp and our endoscopic approach

## CASE REPORT

- **Presentation:** 47-year- old Spanish speaking female was referred for abdominal pain of unclear etiology. She had no history of prior endoscopy.
- **Pertinent Labs:** Hemoglobin 12.3 g/dL.
- **Procedures:** Upper endoscopy was normal. Colonoscopy revealed diverticulosis and a 7 mm polyp arising from a diverticulum in the sigmoid colon. An attempt was made to lift the polyp through submucosal injection with ORISE™ gel but only minimal lifting effect was observed. Polypectomy was subsequently performed with cold biopsy forceps.
- **Pathology:** Edematous granulation tissue.
- **Outcome:** Patient had no complications.

## IMAGES



## DISCUSSION

- Granulation polyps are rarely encountered on colonoscopy and owing to it closely mimicking colon neoplasm, and endoscopist should be able to differentiate between the two
- Granulation polyps have irregular vessels and microvascularity on the surface along with absence of pit patterns
- Removal of these polyps when arising from the diverticulum involves endoscopic mucosal resection and closing of the site using clips or sutures to prevent complications
- When associated with diverticulitis these are benign polyps and hence could be approached with possible surveillance