

Bleeding From a Rare Omental Gastrointestinal Stromal Tumor Found on Capsule Endoscopy

Aida Rezaie^{1,2}, MD, Kayvon Sotoudeh^{1,2}, MD, Indu Srinivasan², MD, and Keng-Yu Chuang², MD
¹Department of Gastroenterology & Hepatology, Creighton University, Phoenix, AZ
²Department of Gastroenterology & Hepatology, Valleywise Medical Center, Phoenix, AZ

ABSTRACT

- GISTs are the most common mesenchymal tumors
- Their presentation varies depending on their location, and less than 5% arise as extragastrointestinal tumors
- We present an unusual case of small bowel gastrointestinal bleeding from a GIST adherent to the omentum

INTRODUCTION

- Gastrointestinal stromal tumors (GISTs) are the most common mesenchymal tumors in the gastrointestinal tract, comprising 1 to 2 % of GI cancers
- About 1 to 2 % of them have malignant potential
- They can arise from the bowel wall as a subepithelial neoplasm in the stomach and small intestine, and less than 5% of them arise as extragastrointestinal tumors in the retroperitoneum, mesentery and omentum.
- Predominantly occur in older adults aged 65 to 69 years old

CASE REPORT

- **Presentation:** 58 year old male presented with several days of epigastric pain, nausea and non-bloody diarrhea
- **Pertinent Labs:** Hemoglobin 4.2 g/dL with a mean corpuscular volume of 78.5 fL that was previously noted to be within normal limits
- **Imaging:** Computed tomography of the abdomen and pelvis with contrast showed a 4 cm circumscribed, hyperdense enhancing exophytic solid mass arising from the small bowel in the left lower quadrant with adjacent hyperenhancement
- **Procedures:** Capsule endoscopy which showed fresh blood in the mid jejunum with more active bleeding surrounding a possible small bowel tumor.
- **Surgical Intervention:** Due to ongoing bleeding and anemia, the patient underwent laparoscopic small bowel resection and lymphadenectomy of a small bowel tumor adherent to the omentum with about 10 cm of proximal and distal margins
- **Pathology:** Low-grade gastrointestinal stromal tumor approximately 3.0 x 3.0 x 2.3 cms with tumor free margins and no evidence of lymphovascular spread

IMAGES

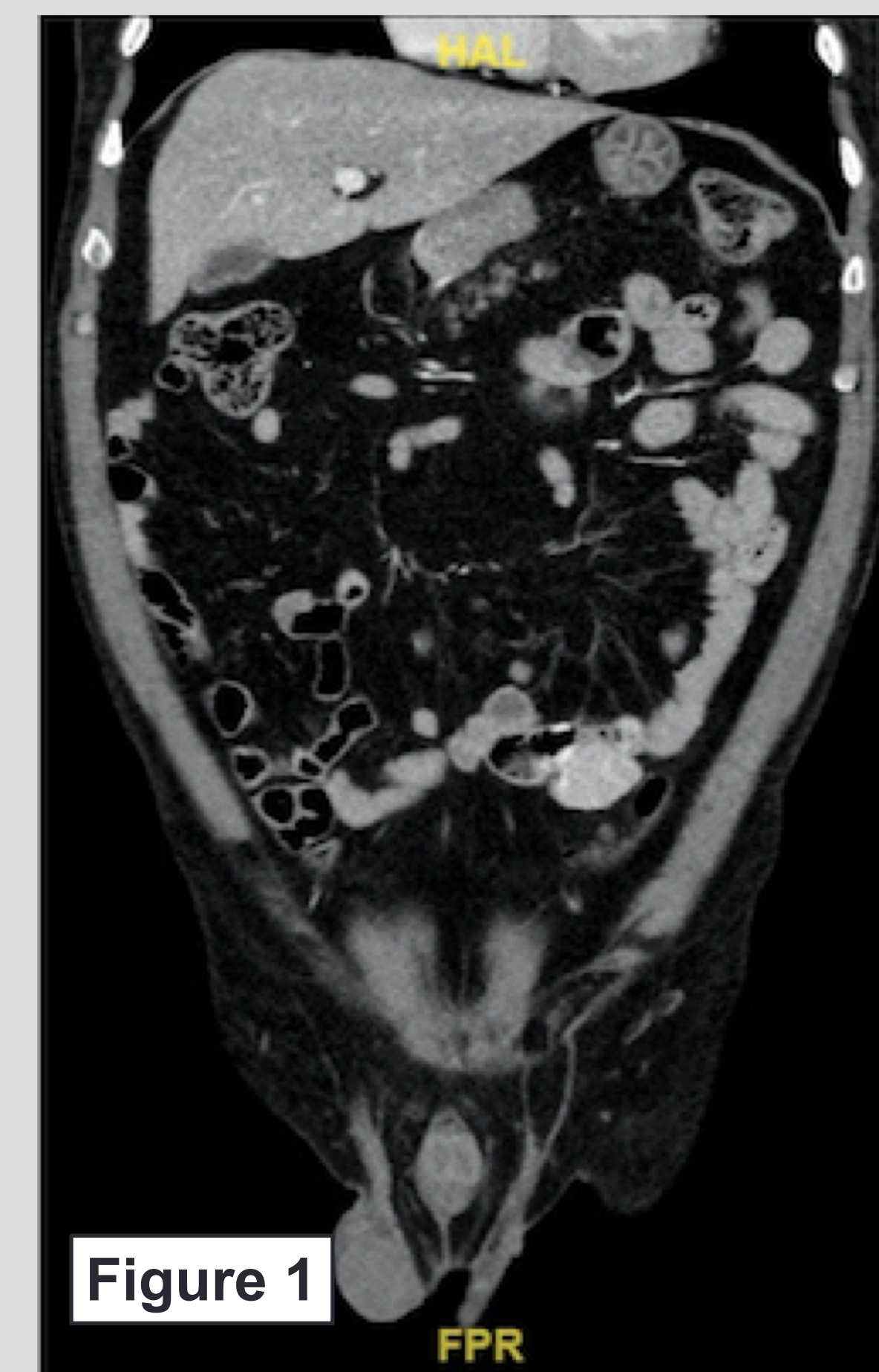


Figure 1. CT Abdomen and Pelvis with contrast demonstrating a 4 cm circumscribed hyperdense enhancing exophytic solid mass arising from the small bowel in the left lower quadrant.

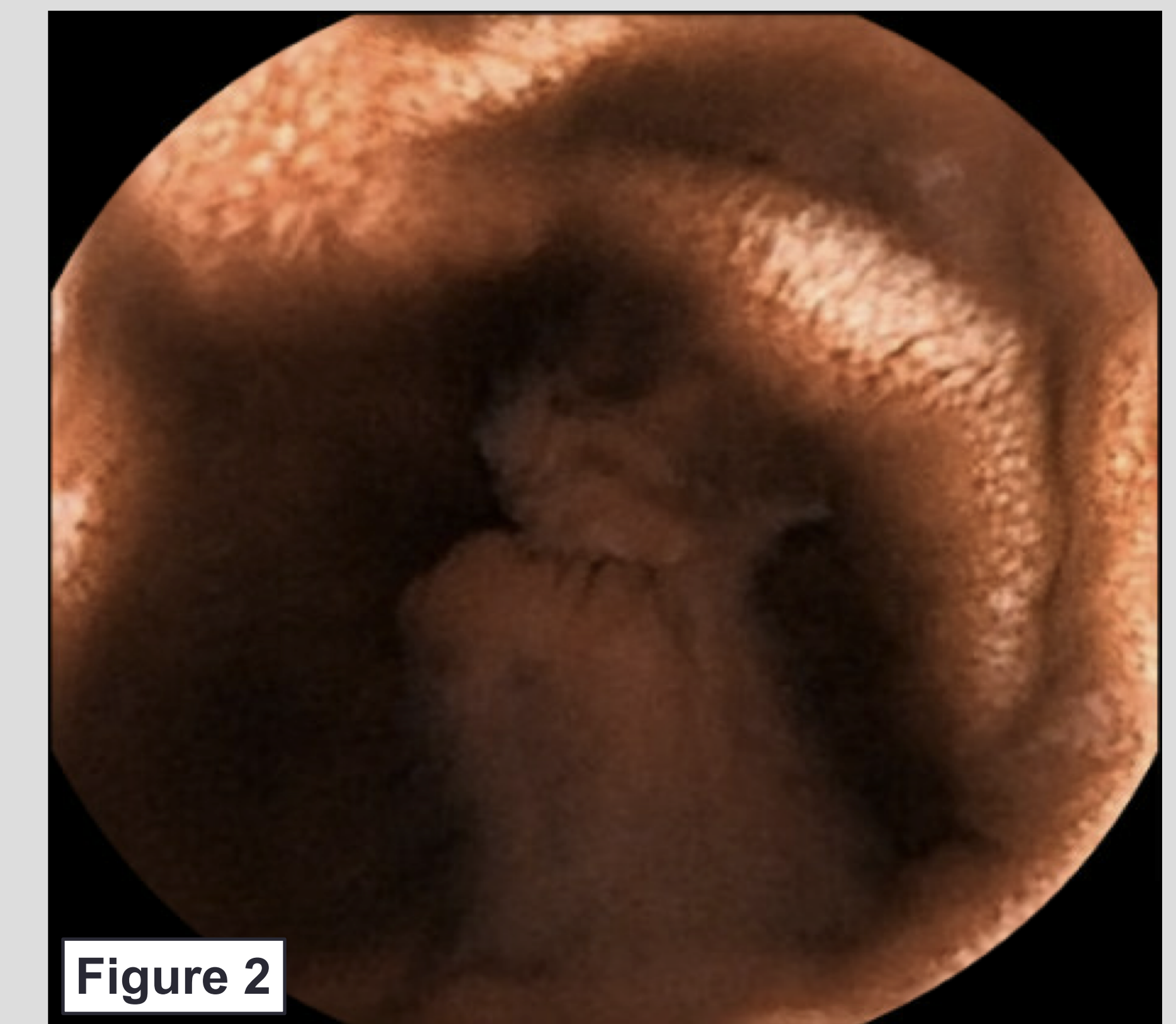


Figure 2. Capsule endoscopy showing a small bowel tumor.

DISCUSSION

- While GISTs are common findings in the gastrointestinal tract, only a small percentage of them can cause gastrointestinal bleeding needing surgical intervention
- Surgical resection remains the mainstay of treatment for localized, non-metastatic GISTs that present with bleeding as it can both stop the bleeding and resect the lesion
- Other modalities of treatment include endoscopic intervention depending on the location or transcatheter arterial embolization
- The patient remained hemodynamically stable with improvement of his blood counts and was discharged home