A 37-year-old male was admitted to our hospital due to weight loss and passage of tarry stools. Upper gastrointestinal panendoscopy showed only gastritis. Abdominal computed tomography revealed one mass-like lesion with wall thickening of the ileum (Fig. 1 a). Single-balloon enteroscopy revealed one well-defined round tumor (Fig. 1 b; Video 1), measuring about 4 × 4 × 5 cm in the terminal ileum, up to 30 cm from the ileocecal valve. The base of the tumor showed swollen mucosa with ulceration (Fig. 1 c).

The patient underwent laparotomy with segmental resection of the ileum on the day after enteroscopy. Histologic features of the tumor showed myofibroblastic proliferation in an inflammatory background (Fig. 1 d); immunohistochemical staining for S100 and c-Kit revealed negative results. The pathologic result demonstrated inflammatory myofibroblastic tumor (IMT).

Gastrointestinal IMT can occur in the alimentary tract or mesentery/omentum [1]. The most common sites of alimentary tract IMT have been noted in ileal locations [1]. The majority of cases have been reported in childhood and early adulthood [1–3]; it is very rare in adults. This is the first reported case of an adult with ileal IMT, which was viewed clearly by single-balloon enteroscopy. Due to a high recurrence rate, the mainstay of therapy is surgical resection [4].

Competing interests: None

Video 1
Anal approach single-balloon enteroscopy showed one round tumor (about 4 × 4 × 5 cm in size) within the terminal ileum.

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Endoscopy 2011; 43: E14 – E15
© Georg Thieme Verlag KG Stuttgart · New York · ISSN 0013-726X

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