Confocal laser endomicroscopy for characterization of Crohn’s disease-associated duodenitis

Confocal laser endomicroscopy (CLE) is a sophisticated endoscopic imaging technique in the armamentarium of modern endoscopy. By enabling real-time and in vivo visualization of cellular and subcellular details correlating with conventional histology, CLE has had tremendous impact on endoscopic diagnosis [1,2]. Several studies have described the utility of CLE for in vivo diagnosis of disorders of the upper gastrointestinal tract, such as Helicobacter pylori gastritis [3] and gastric metaplasia and cancer [3,4]. However, currently there are no available data regarding the utility of endomicroscopy for the in vivo diagnosis of Crohn’s disease of the upper gastrointestinal tract. Here, we report the case of a 41-year-old woman with ileocolonic Crohn’s disease since 1995. The patient was under anti-TNF therapy. Prospecative, blinded imaging studies are required to evaluate the accuracy, sensitivity, and specificity of this endopathological approach.

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Competing interests: None

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Fig. 1 a High-resolution endoscopy in a 41-year-old woman with ileocolonic Crohn’s disease showing a macroscopically normal duodenal mucosa. b Confocal laser endomicroscopy showing dilated microvessels within the lamina propria, mild fluorescein sodium leakage, and some regenerative changes. c A histopathological section from the duodenal biopsy specimen taken from the same area shows hemorrhagic inflammation and epithelial regeneration (hematoxylin-eosin stain), confirming our endomicroscopic findings.

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