A 65-year-old woman presented for evaluation of a large esophageal mass, diagnosed on biopsy as squamous cell papilloma. Computed tomography (CT) showed no lymphadenopathy or distant metastases. The patient refused surgery. Endoscopic mucosal resection (EMR) was attempted at a tertiary referral center but could not be carried out because of difficulty in lifting the lesion. Thus, she was referred to our center for endoscopic submucosal dissection (ESD).

Esophagogastroduodenoscopy (EGD) revealed a large, circumferential, partially obstructive esophageal mass extending from 22 to 30 cm from the incisors (Fig. 1 a, b). Successful circumferential ESD was carried out on the proximal 6 cm of the lesion (Fig. 2 a, b), however, the distal 2 cm could not be resected owing to severe submucosal fibrosis.

Histopathological analysis of the ESD specimen revealed an unusual histomorphologic pattern including hyperkeratosis, acanthosis, dyskeratosis, intraepithelial neutrophils, keratin-filled furrows, and koilocyte-like cells consistent with carcinoma cuniculatum (Fig. 3). Invasion in the submucosa was present. Laparoscopy-assisted esophageal resection was performed, and the resected specimen was staged pathologically as T1bN0. The patient had an uneventful recovery.

Carcinoma cuniculatum of the esophagus is a very rare and extremely well differentiated variant of squamous cell carcinoma, first described in 2005 [1]. Since then, it has been reported in less than 15 cases [2, 3]. The etiology is unknown but there have been reported associations with chronic esophageal irritation, achalasia, diverticulum, and prior caustic injury [1, 4]. Carcinoma cuniculatum of the esophagus has traditionally been managed with esophagectomy [3].

This is the first reported case of carcinoma cuniculatum in which ESD was attempted with partial success. The success was limited owing to submucosal invasion but adequate staging was still achieved: the ESD specimen provided an accurate histopathologic diagnosis and staging to guide further therapy. Thus, ESD could be used not only as a treatment option but also as a staging tool to assess the depth of invasion.

Endoscopy_UCTN_Code_TTT_1AO_2AC

Competing interests: None
Roxana M. Coman\textsuperscript{1}, Amy Collinsworth\textsuperscript{2}, Peter V. Draganov\textsuperscript{1}

\textsuperscript{1} Division of Gastroenterology, Hepatology, and Nutrition, Department of Medicine, University of Florida, Gainesville, Florida, United States

\textsuperscript{2} Department of Pathology, Immunology and Laboratory Medicine, University of Florida, Gainesville, Florida, United States

References


2 Goh GH, Venkateswaran K, Leow PC et al. Carcinoma cuniculatum of the esophagus and tongue: report of two cases, including TP53 mutational analysis. Head Neck Pathol 2014; PMID 24470056


Bibliography

DOI http://dx.doi.org/10.1055/s-0034-1377639

Endoscopy 2014; 46: E531–E532

© Georg Thieme Verlag KG

Stuttgart · New York

ISSN 0013-726X

Corresponding author

Peter V. Draganov, MD

University of Florida

1329 SE 16th Street

Suite 5251

Gainesville

FL 32608

United States

Fax: +1-352-392-9002

Peter.Draganov@medicine.ufl.edu