Scirrhous gastric carcinoma is a diffusely infiltrating type of poorly differentiated gastric carcinoma. It is characterized by cancer cell infiltration and proliferation beneath the gastric mucosa with marked stromal fibrosis [1]. The gastric wall is thickened and stiffened due to diffuse infiltration and proliferation of cancer cells with extensive stromal fibrosis. Endoscopy is useful for assessing the growth pattern, but it is very difficult to obtain an appropriate sample with a routine pinch biopsy. However, after utilizing argon plasma coagulation (APC) to remove the superficial gastric epithelium and cauterize the denuded area in the biopsied sample (Fig. 1), the cancer cells were observed beneath the APC-burned area in the biopsied sample (Fig. 2). The cancer cells, clustered together, were small-sized, atypical cells that contained PAS-positive material in their cytoplasm. On the basis of these findings, a definite histopathological diagnosis of poorly differentiated adenocarcinoma was made.

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A 79-year-old woman attended a clinic because of upper abdominal discomfort. Gastrointestinal endoscopy strongly suggested the presence of advanced gastric cancer, but no cancer cells were found in routine biopsy specimens. The patient was referred to our hospital for definitive diagnosis and further treatment. At gastrointestinal endoscopy, the stomach was very hard and could not be distended with air; it was covered with roughened mucosa that was red and edematous, but no erosions or ulcerations were seen (Fig. 1). Biopsy was done again, but a histopathological diagnosis was not obtained.

To obtain a definitive diagnosis, biopsy after APC treatment was utilized [2]. APC treatment included 50 W soft-mode coagulation and 0.5 L/min argon gas (ICC200; Erbe Co., Tübingen, Germany). The first biopsy after APC treatment yielded a definite histopathological diagnosis; cancer cells were observed beneath the APC-burned area in the biopsied sample (Fig. 2). The cancer cells, clustered together, were small-sized, atypical cells that contained PAS-positive material in their cytoplasm. On the basis of these findings, a definite histopathological diagnosis of poorly differentiated adenocarcinoma was made.