

Endoscopic resection of a large ileal lipoma

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A research team from Japan reported a case of a large lipoma, 50 mm in diameter, in the terminal ileum, which was completely removed by a combination of the so-called endoscopic unroofing technique and endoscopic submucosal dissection.

Lipoma is relatively common in the colon but is less often in the <u>small</u> <u>intestine</u>. Most lipomas are incidentally detected at <u>endoscopy</u> and are usually small and asymptomatic. However, some of them can present with obstruction and/or intussusceptions. Surgical resection is commonly recommended to remove such significant lipomas with a limited pedicle and larger than 2 cm in size, as endoscopic resection may result in unfavorable complications such as intestinal perforations.

A research article to be published on April 7, 2010 in the <u>World Journal</u> of <u>Gastroenterology</u> addresses this question. The endoscopic submucosal dissection (ESD) technique was used to remove a large lesion en bloc.

Their results showed large ileal lipoma can be completely removed with the modified ESD procedure in combination with endoscopic unroofing technique (from the top to the bottom like peeling a banana).

More information: Morimoto T, Fu KI, Konuma H, Izumi Y, Matsuyama S, Ogura K, Miyazaki A, Watanabe S. Peeling a giant ileal lipoma with endoscopic unroofing and endoscopic submucosal dissection. www.wignet.com/1007-9327/full/v16/i13/1676.htm



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