Upper GI Bleed Caused by Gastritis Cystica Profunda in an Unoperated Stomach

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Abstract

Gastritis Cystica Profunda (GCP) is a rare but benign submucosal lesion usually occurring in the fundus of the stomach. A 69 year old man with no past surgeries presented with diffuse abdominal pain associated with melena for 2 weeks. No history of trauma or gastric ulceration. EGD showed a 3 cm submucosal mass at the greater curvature of the stomach with bleeding stigmata; biopsy revealing only chronic gastritis. An EUS was performed showing submucosal heterogeneous echogenicity whereupon repeat 6 month surveillance EUS with tunnel biopsy revealed gastritis cystic profunda with localized atrophy and intestinal metaplasia. The gastric lamina propria displayed florid stromal hyperplasia reminiscent of that seen in inflammatory fibroid polyps. Patient was reassured and scheduled for a repeat EGD w/ EUS in another 6 months.

Discussion

We have a case of a 69 y/o male with no past surgeries presenting with diffuse abdominal pain, melena of 2 weeks duration. EGD showed a 3 cm submucosal mass at the greater curvature of the stomach with bleeding stigmata; biopsy revealing only chronic gastritis. An EUS was performed showing submucosal heterogeneous echogenicity whereupon repeat 6 month surveillance EUS with tunnel biopsy revealed gastritis cystic profunda with localized atrophy and intestinal metaplasia. The gastric lamina propria displayed florid stromal hyperplasia reminiscent of that seen in inflammatory fibroid polypos. GCP may be precancerous as carcinoma is frequently found at old gastrojejunostomy stomas.

* It is usually associated with previous gastric surgery. GCP may be precancerous as carcinoma is frequently found at old gastrojejunostomy stomas.

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References: