

SERRATED COLORECTAL LESIONS OF INFREQUENT ETIOLOGY: REPORT OF A CASE OF MANTLE CELL LYMPHOMA

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Poster

Colorectal

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A 69-year-old male on anticoagulation for atrial fibrillation presenting with melena was diagnosed with mantle cell lymphoma involving the duodenum and ascending colon, with multiregional infradiaphragmatic lymphadenopathy and ileal involvement on PET-CT, managed with observation.

KEY POINTS

- Endoscopy revealed two 20mm polypoid lesions in the duodenal bulb and over 20 serrated polyps throughout the colon measuring 2-8mm
- Pathology confirmed mantle cell lymphoma in duodenal biopsies and ascending colon polyps, while sigmoid lesions were adenomas and hyperplastic polyps
- PET-CT demonstrated FDG uptake in the ileum, multiregional infradiaphragmatic lymphadenopathy suggestive of secondary lymphoma infiltration, and splenomegaly
- Bone marrow biopsy and flow cytometry ruled out marrow involvement
- Given the indolent nature, a watch-and-wait strategy was adopted with no signs of progression on follow-up PET-CT and improving laboratory parameters

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