

Case report on colonic Dieulafoy's lesion: A rare cause of lower gastrointestinal hemorrhage

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Dieulafoy's lesion is a relatively rare, but potentially life-threatening, condition. It accounts for 1-2% of acute gastrointestinal (GI) bleeding, but arguably is under-recognized rather than rare. Extra-gastric Dieulafoy's lesions are even more uncommon. We report the case of a 92-year-old male who presented with gastrointestinal bleeding from a transverse colonic Dieulafoy's lesion. He presented with multiple episodes of melena followed by one episode of fresh blood per rectum. In addition, there was associated pre-syncope and anemia. Upper GI endoscopy was negative for an upper GI source of bleeding but on colonoscopy an actively oozing Dieulafoy's lesion was identified in the ascending colon. Bipolar cautery and two hemostatic endoclips were applied to achieve hemostasis. Clinicians should consider this rare entity as a potential cause of potentially life-threatening lower gastrointestinal bleeding.

Biography

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