

A Large Brunner's Gland Hamartoma Caused Gastrointestinal Bleeding: Case Report and Review of Literature

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Background: Brunner's gland hamartoma is a rare benign tumor of the duodenum. It may present with either various symptoms caused by obstruction or bleeding; or incidental mass with no symptoms. A 54-years old woman admitted to hospital for melena. Esophagogastroduodenoscopy revealed a large pedunculated polyp arising from distal portion of the duodenal bulb; erosions and hematin coatings was found overlying mucosa. Endoscopic removal was not possible due to its measures and thick stalk. The lesion was resected at the base of stalk with normal mucosa via duodenotomy. Histopathologic examination revealed that this tumor was a Brunner's gland hamartoma, 5 cm in its greatest dimension. We described a case of Brunner's gland hamartoma caused upper gastrointestinal bleeding four years after the first diagnosis and related literature was reviewed.

?YmkcfXg. Brunner's gland; Surgical resection; Duodenal polyp

Introduction

Brunner's glands are located in the deep mucosal or submucosal layers of the most proximal region of the duodenum [1]. Brunner's gland hamartoma, also known as Brunneroma or polypoid hamartoma, is a rare, benign, proliferative lesion arising from the Brunner's glands of the duodenum. Benign small bowel tumors are found in 0.16% of cases in autopsy series, and a very small portion of these tumors are Brunner's gland hamartomas [2]. The natural history of this lesion is not well understood. Gastrointestinal (GI) bleeding is the most common presentation followed by intermittent obstruction, and the lesions can be found incidentally without any symptoms as well [3]. In this study, we reported a Brunner's gland hamartoma that presented with upper GI bleeding 5 years after initial diagnosis, and presented a short review of literature.

Case Report

A 50-year-old woman was admitted to hospital with intermittent abdominal pain localized to the epigastrium. An upper GI endoscopy revealed a 2-cm (diameter) submucosal lesion localized at the distal portion of the duodenal bulb plus antral gastritis (Figure 1a).

neoplastic cells, which stand in sharp distinction against the normal tissues. Furthermore, adenomas can show atypia, pleomorphism, mitosis, or even dysplastic changes indicating their neoplastic nature. Brunner's gland adenomas emerging from neoplasms that undergo malignant transformation are a very common occurrence, since it is natural to assume that the long standing effect of gastric stimuli on these glands will not only lead to severe hyperplasia and dysplasia but

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