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Filiform ulcerative colitis-rare entity captured

Filiform polyposis is an uncommon entity that is most often encountered in the colon of patients with a history of IBD. It is characterized by a large number of worm-like polyps lined by histologically normal colonic mucosa. They usually have a thin, straight shape resembling the stalks of polyps without the heads, range in size from 1.5-3.0 cm in length and 0.5 cm in diameter and can occur as solitary polyps or as diffuse polyposis distributed over large areas of the colonic mucosa. Long-term inflammation of the colonic mucosa during chronic IBD with alternating periods of ulceration and healing may lead to the formation of finger-like projections, so-called filiform polyps. Several filiform polyps form large tumor masses, termed giant filiform polyposis. Histologically, the polyps are filiform, with a central core, containing vessels and smooth muscle fibers. Clinicopathologic and immunophenotypic studies regarding filiform polyposis without IBD demonstrate that there is generalized polyposis, considered to be an asymptomatic sequela of ulcerative colitis. Filiform polyposis may resemble villous adenomas on colonoscopy, biopsy should be recommended in all cases. Filiform polyposis alone is not an

indication for surgical resection, but complications, such as acute massive hemorrhage or intestinal obstruction, may necessitate surgical intervention. The pathologic specimen of right hemicolectomy shows filiform polyposis in the ascending colon and transverse colon with satellite lesions in a known case of ulcerative colitis.

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