

Title:

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An unusual esophageal cancer

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Dear Editor,

A 67-year-old woman was referred to our department after a 1-cm submucosal bulge in the esophagus located 28 cm from the incisor was found during a gastroscopy (Fig. 1A and B). The patient has had intermittent swallowing discomforts for the past 1 year. Physical examination revealed no obvious abnormalities. Her laboratory findings were normal. Computed tomography of the chest, abdomen, and



pelvis showed no obvious space-occupying lesions. The submucosal bulge was considered an esophageal leiomyoma by endoscopic ultrasonography (Fig. 1C, arrow). After signing the informed consent form for endoscopic surgery, the patient underwent endoscopic submucosal excavation for the bulge during hospitalization Unexpectedly, under intravenous anesthesia. subsequent histopathologic examination of the resected specimen revealed a moderately differentiated squamous cell carcinoma (Fig. 1D) with positive vertical margins under microscopy. The immunohistochemistry results were as follows: Desmin (muscularis mucosa +), SMA (muscularis mucosa +), and CD34 (no intravascular tumor emboli). Multidisciplinary consultation recommended additional radiotherapy for the patient, but the patient and her family refused further radiotherapy. The patient resumed a semi-liquid diet without considerable discomfort and was discharged on the fourth day after surgery.

Discussion

This article describes an unusual case of a submucosal esophageal cancer, which should not typically arise and should not have the appearance that the present case had[1-3]. This lesion was diagnosed only after endoscopic submucosal excavation was performed, given that the lesion was incorrectly diagnosed as an esophageal leiomyoma. The highlight of this case is that esophageal cancer can present as a benign submucosal tumor of the esophagus.

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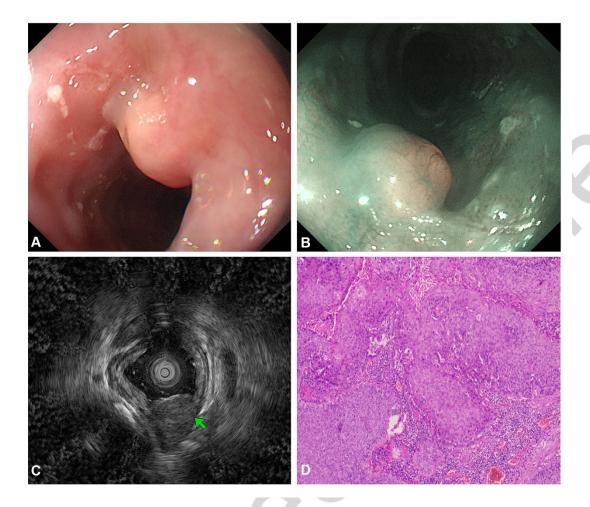


Fig. 1. A. A 1-cm submucosal bulge in the esophagus located 28 cm from the incisor was found during a gastroscopy (white light imaging). B. The submucosal bulge was shown on narrow band imaging. C. The submucosal bulge was considered an esophageal leiomyoma by endoscopic ultrasonography (arrow). D. Histopathologic examination of the resected specimen revealed a moderately differentiated squamous cell carcinoma.