

# Small bowel adenocarcinoma diagnosed by video capsule endoscopy in a patient with celiac disease: a case report and review of literature

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Celiac disease is an immune mediated enteropathy triggered by gluten in genetically predisposed individuals. Patients with celiac disease are at a higher risk of gastrointestinal malignancies. Diagnosis at an advance stage is one of the factors of an unfavorable prognosis of these complications. Our patient is a woman who was diagnosed with celiac disease at 53 years of age. After two years on a gluten-free diet she developed sideropenic anemia. No source of bleeding was found on the esophago-gastroduodenoscopy or colonoscopy. Video capsule endoscopy revealed exulcerated bleeding stenosis in the jejunum, in front of which the capsule lodged. There were no signs of infiltration on simultaneous CT enterography. The patient was operated on and the infiltration of the jejunum was resected. The specimen was evaluated by a histopathologist as a moderately differentiated adenocarcinoma. Due to the risk factors, the patient received adjuvant chemotherapy. The knowledge of the malignant complications of celiac disease, their risk factors and the possibilities of modern enteroscopic methods could help in the early diagnosis and improvement of the prognosis of these diseases. Due to a lack of data and an absence of guidelines, treatment of a small bowel adenocarcinoma is based on an expert agreement and guidelines for colon cancer. Surgical treatment is the only potentially curative option. For stage II with risk factors and stage III adjuvant chemotherapy should be considered.

**Key words:** adenocarcinoma, video capsule endoscopy, celiac disease, small bowel, surgery.

## Adenokarcinom tenkého střeva diagnostikovaný pomocí video kapslové endoskopie u pacientky s celiakií: kazuistika a přehled literatury

Celiakie je imunitně zprostředkovaná enteropatie, rozvíjející se při požití lepku u geneticky predisponovaných osob. Je spojena se zvýšeným rizikem rozvoje malignit trávicího traktu. Tyto komplikace jsou většinou diagnostikovány v pozdním stádiu, což je jedním z faktorů jejich nepříznivé prognózy. Naše kazuistika se týká ženy, jíž byla celiakie diagnostikována v 53 letech. Po 2 letech se u ní náhle rozvinula sideropenická anémie. Esofagogastroduodenoskopie ani kolonoskopie neprokázala krvácení do gastrointestinálního traktu. Video kapslová endoskopie odhalila exulcerovanou stenózu v jejunu se známkami krvácení, před kterou kapsle retinovala. Na simultánně provedené CT enterografii nebyla infiltrace patrná. Byla provedena operační revize s resekcí infiltrace jejunu. Histologicky byl prokázán adenokarcinom tenkého střeva, vzhledem k rizikovým

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