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Anatomopathological and Epidemiological Profile of Digestive Polyps: Experience of the Department of Pathological Anatomy of the University Hospital Center Mohammed VI- CHU-Marrakech-Morocco: About 140 Cases

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RESEARCH ARTICLE

ABSTRACT

Digestive polyps are a frequent occurrence in the general population, and their identification through anatomopathology is vital for determining the most appropriate therapeutic intervention. This article provides a detailed exploration of the anatomopathological characteristics of digestive polyps, including their topographical and histological features, as well as their degree of dysplasia. The research findings suggest that adenomatous polyps were the most common type of polyp, followed by hyperplastic, inflammatory, and juvenile polyps. The prevalence of adenomatous polyps increases with age and is linked to a higher risk of cancer progression. Therefore, early detection of adenomatous polyps is critical to prevent the development of colorectal cancer.

Regular endoscopic surveillance is recommended to detect and remove adenomatous polyps before they progress to cancer. Furthermore, the degree of dysplasia observed in polyps can help determine the appropriate surveillance intervals and treatment plans.

In conclusion, this study emphasizes the importance of anatomopathological analysis in the diagnosis and management of digestive polyps. By identifying the type and degree of dysplasia of polyps, healthcare professionals can implement effective therapeutic interventions and improve patient outcomes.

KEYWORDS

Polyp, Digestive, Histology

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INTRODUCTION

A digestive polyp is a small tumor that protrudes into the lumen of the digestive tract. The management and surveillance of these polyps depend on their histological type and the risk of degeneration into cancer. This article aims to describe the anatomopathological aspects of digestive polyps, explore their topographical and histological characteristics, and assess the degree of dysplasia.

MATERIALS & METHODS

We conducted a study in the anatomy pathology department of the university Hospital Center MOHAMMED VI- CHU-Marrakech-Morocco : with 140 cases of digestive polyps collected between 2015 and 2019. We aimed to describe the anatomopathological aspects of digestive polyps, investigate the topographical and histological characteristics of the different types of polyps, and evaluate the degree of dysplasia.

FINDINGS

Our analysis revealed that the mean age of patients with digestive polyps was 52.3 years with a male-to-female sex ratio of 1.3. Colon was the most common location for polyps (51.4%), and single polyps were present in 67.5% of patients. The most common type of polyp was the diminutive polyp (59.7%), and 74% of polyps were sessile. Adenomatous polyps were the most frequent (59.3%), followed by hyperplastic polyps (17.1%), inflammatory polyps (11.4%), and juvenile polyps (6.4%). Adenomatous polyps were mostly tubular (50%) with a clear male predominance (63.9%) and a mean size of 9.6 mm. Hyperplastic polyps were mostly located in the gastric area (68%) with a clear female predominance (M/F = 8/17) and a mean size of 9.83 mm. Inflammatory polyps were mostly located in the colon (65%) with a clear male predominance (60%) and an average size of 10mm. Juvenile polyps had a male predominance (62.5%) and were mostly located in the rectum (62.5%) with an average size of 12.2mm.

Figure 1: Endoscopic image of a pedunculated polyp.

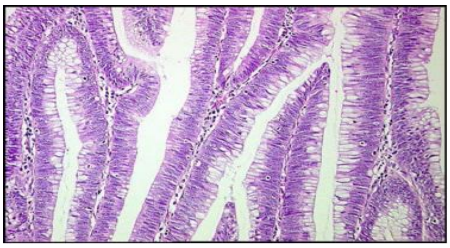

Figure 2: Endoscopique d'un polype pédiculé.

DISCUSSION

Digestive polyps are sessile or pedunculated formations that protrude from the digestive mucosa [1,2], Their macroscopic appearance corresponds to various histological lesions of different histogenesis and characterized by a different evolution [3-5]. The histological types of polyps vary according to their location in the digestive tract, and the risk of progression to cancer is well documented for adenomatous polyps. However, the natural history of other types of polyps is less well known [6,7,11]. Adenomatous polyps are dysplastic, with low-grade and high-grade dysplasia, and their prevalence increases with age [8,9]. Juvenile polyps are focal hamartomatous malformations of the mucosal components, and hyperplastic polyps are generally small and located in the rectum [10,11)]

CONCLUSION

Digestive polyps are common in the general population and their diagnosis through anatomopathology is crucial for determining the appropriate therapeutic management. This article provides a detailed description of the anatomopathological aspects of digestive polyps, explores the topographical and histological characteristics of various types of polyps, and assesses the degree of dysplasia. Our findings show that adenomatous polyps were the most common, followed by hyperplastic, inflammatory, and juvenile polyps. The prevalence of adenomatous polyps increases with age and is associated with a higher risk of progression to cancer. Endoscopic surveillance is crucial for detecting colorectal cancer at an early stage [1,11].

REFERENCES

1) Digestive System Tumours - WHO Classification of Tumours, 5th Edition, Volume 1 -WHO Classification of Tumours Editorial Board -ISBN-13 978-92-832-4499-8.
2) Berrebi W. Hépatologie gastro-entérologie - Estem - Med-line - 2843711312. 3 éme ed. Paris. 2020.
3) Etude clinique et anatomopathologique des polypes digestifs au chu du Point G. Tayue Ngnoche, Marcelle Paule Aspects anatomo-pathologiques des polypes digestifs.
4) Carmack SW, Genta RM, Schuler CM, Saboorian MH. The current spectrum of gastric polyps: a 1-year national study of over 120,000 patients. Am J Gastroenterol. 2009, 104:1524–1532.
5) Faivre J . Prévention des cancers colorectaux et polypectomie. Gastro Entérol Clin Biol. 2020, 64.
6) Yacouba P. Polypes recto coliques en milieu hospitalier à Ouagadougou. Thèse médecine. Université de Ouagadougou. 1999,134.
7) Morais DJ, Yamanaka A, Zeitune JMR, Andreollo NA. Gastric polyps: A retrospective analysis of 26,000 digestive endoscopies. Arq Gastroenterol 2007, 44: 14-17.
8) Bretthauer M, Kaminski MF, Løberg M, Zauber AG, Regula J et al. Population-Based Colonoscopy Screening for Colorectal Cancer: A Randomized Clinical Trial. Jama Intern Med. 2016, 176: 894-902.
9) Holme O, Bretthauer M, Tor J Eide, Løberg E, Grzyb K, et al. Magnus Løberg. Long-term risk of colorectal cancer in individuals with serrated polyps . Randomized Controlled Trial. 2021, 64:929-936.
10) Eladrari A. Les aspects anatomopathologiques des polypes colorectaux. Thèse Med. Marackech; 2020.157.