Filiform Polyposis in Ulcerative Colitis: A Rare Pediatric Case

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Background: Filiform polyposis is a rare benign condition referred to as inflammatory polyposis, or pseudopolyposis that is usually found in association with Crohn’s disease, ulcerative colitis or granulomatous colitis which is formed by non-specific mucosal and submucosal reactions to previous severe inflammation. It is characterized by multiple finger-like projections most commonly in the transverse and descending colon.

Case Report: A 15-year-old girl with a history of ulcerative colitis was admitted to the pediatric emergency department with abdominal pain attacks for the past 2 weeks. Abdominal ultrasound and magnetic resonance enterography revealed mucosal thickening in the transverse and descending colon. Colonoscopy revealed small filiform polyps throughout the colon. Histopathological examination revealed inflammatory polyps associated with ulcerative colitis.

Conclusion: Non-neoplastic filiform polyps can be detected even in children with ulcerative colitis with long-term remissions.

Keywords: Children, filiform, polyposis, ulcerative colitis

Her physical examination revealed a body weight of 49 kg (10-25th centile) and a height of 160 cm (25-50th centile). She had fever of 36 °C. She was pale and had mild abdominal tenderness. The cardiovascular and respiratory system examinations were unremarkable.

Abdominal ultrasound and magnetic resonance enterography revealed mucosal thickening in the transverse and descending colon. Colonoscopy was repeated, which revealed small filiform polyps with 0.5×1.5×3 cm dimensions throughout the colon but most common in the rectosigmoid, descending, and transverse colon (Figure 1). Histopathological examination revealed inflammatory polyps associated with ulcerative colitis (Figure 2). Informed consent was obtained from the patient’s parents.

CASE PRESENTATION

A 15-year-old girl with ulcerative colitis who was in remission and administered 5-aminosalicylic acid and intermittent prednisolone treatment for the past 6 years was admitted to the pediatric emergency department with abdominal pain attacks for the past 2 weeks. Her parents were first-degree cousins. She had a healthy sibling. She was born via spontaneous vaginal delivery with a birth weight of 3,200 g. She had no family history of inflammatory bowel disease and chronic or autoimmune disease.

DISCUSSION

Inflammatory filiform polyps in the colon of patients with ulcerative colitis have been first reported by Appelman et al. (8) in 1974. The incidence of inflammatory polyps has been reported to be 10%-20% in both ulcerative colitis and Crohn’s disease (5). It has been...
postulated that these polyps develop in patients with ulcerative colitis and Crohn’s disease due to regeneration of mucosa during remission after recurrent acute inflammation (5). Moreover, these polyps have been determined as the asymptomatic sequela of ulcerative colitis in clinicopathologic and immunophenotypic examinations (1). Rarely, these filiform polyps may be relatively large in size and are known as giant filiform polyps (3).

The cases reported in the literature were primarily young adults and elders (aged >38 years) (1,3-5). A limited number of pediatric cases have also been reported (6,7).

Typically, patients are admitted with anemia, weight loss, abdominal pain, diarrhea, and bleeding (1,3). Our patient was admitted with abdominal pain when she was in remission. She underwent colonoscopy for the suspicion of disease activation, which revealed filiform polyps throughout the colon. Histopathological examination of biopsy specimens revealed inflammatory polyps, without mucosal dysplasia.

Filiform polyps can bridge and fill the colon lumen. Widespread, long, and large-sized polyps can cause complications such as obstruction and bleeding (5). These polyps are non-neoplastic and are not an indication for colectomy. Since the patient’s disease was inactive, treatment continued. The patient and the parents were informed about the complications of filiform polyps and the patient was followed up closely.

In conclusion, non-neoplastic filiform polyps can be detected even in children with ulcerative colitis with long-term remissions.

Conflict of Interest: No conflict of interest was declared by the authors.

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