

## Linked Color Imaging Highlights Colonic Elastofibromatous Polyps

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A 71-year-old woman underwent screening Colonoscopy (CS). CS revealed a 3-mm slightly yellowish, poorly demarcated lesion in the sigmoid colon by White Light Imaging (WLI) (Figure 1a), which, however, was highlighted as an orangey, well-circumscribed, smoothly demarcated, elevated lesion by Linked Color Imaging (LCI) (Figure 1b). Cold forceps polypectomy was carried out on the suspected lesion, which was considered a special type of submucosal tumor. Histologically, in contrast to the mucosal layer which was found intact, the polypoid lesion was found to be a colorless, whorl-like aggregate in the submucosa (Figure 2a), which tested positive for elastic Tissue-Masson trichrome stain and was thus identified as accumulated degenerative elastic fibers (Figure 2b). The lesion was finally diagnosed as colonic elastofibromatous polyp [1]. While WLI was not readily available for differential diagnosis, LCI highlighted the differences in color between the surface of this lesion and the surrounding normal mucosa and proved helpful in its differential diagnosis [2].

Figure 1.

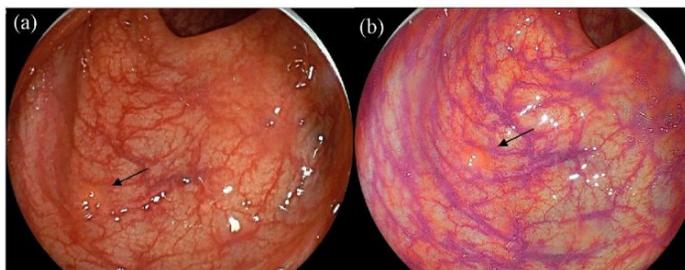
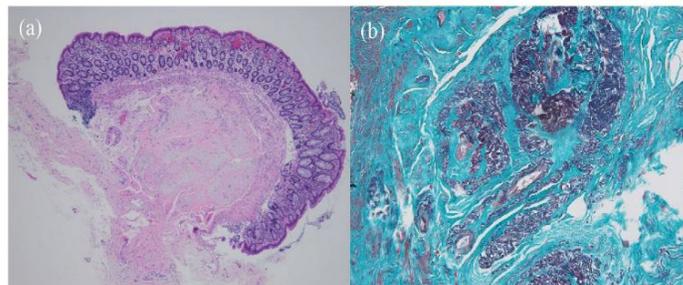


Figure 2.



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### References

1. Enjoji M, Sumiyoshi K, Sueyoshi K (1985) Elastofibromatous lesion of the stomach in a patient with elastofibroma dorsi. *Am J Surg Pathol* 9: 233-237.
2. Yoshida N, Naito Y, Yasuda R, Murakami T, Hirose R, et al. (2017) Linked color imaging improves the visibility of various featured colorectal polyps in an endoscopist's visibility and color difference value. *Int J Colorectal Dis* 9: 1253-1260.