Virchows Arch (1995) 427:227

LETTER TO THE EDITOR

Sir,

We have read with great interest the article by Tsuchikame et al. [7] which appeared in a previous, issue of the journal. We agree with the endoscopic and histopathological diagnosis of fundic gland polyps (FGPs), but, in our opinion, some statements of the article deserve comment.

FGPs with comparable histology have been described in a number of articles in either "sporadic" form [2] or associated with familial adenomatosis coli (FAC)-Gardner' syndrome [9]. Recently, FGPs were also described in association with the hereditary flat adenoma syndrome [4]. Some authors have reported a difference in the number of polyps and in the results of histochemical reactions [5] between sporadic and syndrome related FGPs, a difference that others [3] have failed to confirm.

A first, perhaps minor, criticism of the article of Tsuchikame et al. [7] is the absence of any mention of the early German literature on sporadic FGPs [2], quoted by many authors as the first histological description of FGPs ("Elster" polyps). The seminal paper of Utsunomiya et al. [8] is often quoted as the first description of FGPs associated to FAC and it is clear that this article called attention to the upper gastrointestinal lesions in patients with FAC. The endoscopic findings of the minute polyps in the body and fundic mucosa described are typical of FGPs, but the authors biopsied only the antral polyps.

Tsuchikame et al. [7], in their very stimulating discussion, recall the possibility of late development of colorectal adenomas [1], in some patients with FAC. Bearing this in mind, apparently "sporadic" FGPs could be early manifestations of FAC. The mean age of the three patients (35.3 years) of Tsuchikame et al. [7] is lower than that commonly reported for sporadic FGPs (52–55 years).

The work of Tsuchikame et al. [7] is an interesting report of the possible occurrence of non-syndromic FGPs in the same family, but Sipponen et al. [6] have already reported the occurrence of FGPs in a mother and her son among their 52 patients with sporadic polyps. Only 5 of the 52 patients had a colonscopy performed as a control for the negative family history for FAC.

Paolo Declich · Carlo Galli · Giuseppe Isimbaldi · Maria Sironi
Department of Pathology, Legnano General Hospital,
Via Candiani, 2, I-20025 Legnano, Italy

References

1. Asman HB, Pierce ER (1970) Familial multiple polyposis: a statistical study of a large Kentucky kindred. Cancer 25:972–980
2. Elster K, Eidt H, Ottenjann R, Rosch W, Seiert E (1977) Drüsenkörperzysten, eine polypoide Läsion der Magenschleimhaut. Dtsch Med Wochenschr 102:183–187
3. Lee RG, Burt RW (1986) The histopathology of fundic gland polyps of the stomach. Am J Clin Pathol 86:498–503
4. Lynch HT, Smyrk TC, Lanspa SJ, Jenkins JX, Lynch PM, Cavalieri J, Lynch JF (1993) Upper gastrointestinal manifestations in families with hereditary flat adenoma syndrome. Cancer 71:2709–2714
5. Nishiura M, Hirota T, Itabashi M, Ushio K, Yamada T, Oguro Y (1984) A clinical and histopathological study of gastric polyps in familial polyposis coli. Am J Gastroenterol 78:98–103
6. Sipponen P, Laxen F, Seppala K (1983) Cystic "hamartomatous" gastric polyps: a disorder of oxyntic glands. Histopathology 7:729–737
7. Tsuchikame N, Ishimaru Y, Ohshima S, Takahashi M (1993) Three familial cases of fundic gland polyposis without polyposis coli. Virchows Arch [A] 422:337–340
8. Utsunomiya J, Maki T, Iwana T, Matsunaga W, Ichikawa T, Shimomura T, Hamaguchi E, Aoki N (1974) Gastric lesion of familial polyposis coli. Cancer 34:745–754
9. Watanabe H, Enjoji M, Yao T, Ohsato K (1978) Gastric lesions in familial adenomatosis coli: their incidence and histologic analysis. Hum Pathol 9:269–283