Very Well-Differentiated Gastric Adenocarcinoma of the Fundic Gland Type With Intriguing Morphologic Features: A Case Report and Review of the Literature

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Gastric adenocarcinoma of the fundic gland type (GA-FG) is a rare entity that has only recently been described and defined, and there is ongoing controversy regarding the malignant potential of this lesion. We report the case of a GA-FG in a 49-year-old man who was referred to endoscopy for management of a gastric polyp. Endoscopy showed a polypoid lesion in the gastric fundus that was successfully removed with endoscopic resection. Grossly, the polyp measured 1.1 cm in greatest dimension. Microscopic examination showed irregularly branched neoplastic glands undermining the surface foveolar epithelium without definitive continuity between the neoplastic glands and the foveolar epithelium. Continuity between the neoplastic glands and the fundic glands was clearly identified, indicating that the tumor arose from the fundic glands. The tumor cells exhibited enlarged atypical nuclei with occasional cells showing oxyntic cytoplasm. The tumor invaded the submucosa with complete disruption of the muscularis mucosae and demonstrated mild lymphocytic and fibroblastic stromal reaction. No necrosis, mitoses, or lymph-vascular invasion was identified. Although some authors have proposed reclassification of GA-FG as “oxyntic gland polyp/adenoma,” in light of several reported cases with submucosal invasion as well as a single case with lymphatic invasion, we maintain that this neoplasm is best categorized as an extremely well-differentiated adenocarcinoma to reflect its invasive potential.

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