

From Benign to Blockade: A Rare Case of Intestinal Obstruction Due to an Anal Fibroepithelial Polyp

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Abstract: *Fibroepithelial polyps, or hypertrophied anal papillae, are benign lesions typically arising at the dentate line due to chronic irritation or injury. Although common, they are rarely associated with significant clinical complications. We report an exceptionally rare case of a 48 - year - old male presenting with obstructive ileus caused by a giant fibroepithelial polyp of the anus. Clinical evaluation revealed a large rectal mass obstructing the lumen, which was successfully excised using an electrothermal bipolar vessel sealer. Histopathology confirmed the benign nature of the lesion. This case highlights an unusual presentation of a typically innocuous lesion resulting in a significant surgical emergency.*

Keywords: Fibroepithelial polyp, hypertrophied anal papilla, intestinal obstruction, anal mass

1. Introduction

Fibroepithelial polyps, also known as hypertrophied anal papillae, are benign skin tags that arise at the dentate line, where the squamous epithelium of the anal canal transitions to columnar epithelium. These lesions are believed to result from a hyperplastic response of the modified ectoderm to chronic irritation, repeated injury, or infection. We report an exceptionally rare case of a giant hypertrophied anal papilla leading to obstructive ileus—a previously undocumented complication.

2. Case Report

A 48 - year - old male presented to the emergency department with diffuse, cramping abdominal pain of progressive onset, accompanied by persistent vomiting and constipation for the past five days. His medical history included recurrent episodes of intermittent abdominal discomfort, anal bleeding, and chronic perianal pain attributed to longstanding hemorrhoidal disease over the preceding three years. On digital rectal examination, a large, elastic, smooth - surfaced mass with convoluted grooves was palpated in the distal rectum, approximately 2 cm above the dentate line, causing significant luminal obstruction.



Figure 1: Clinical appearance of the giant fibroepithelial anal polyp.

Proctoscopic evaluation followed by biopsy and intraoperative frozen section analysis confirmed the lesion's benign nature. The mass was successfully excised via local resection using an electrothermal bipolar vessel sealing device. Histopathological and immunohistochemical

analysis confirmed the diagnosis of a fibroepithelial polyp of the anus. The patient had an uneventful postoperative course and was discharged on the third day after surgery without complications.

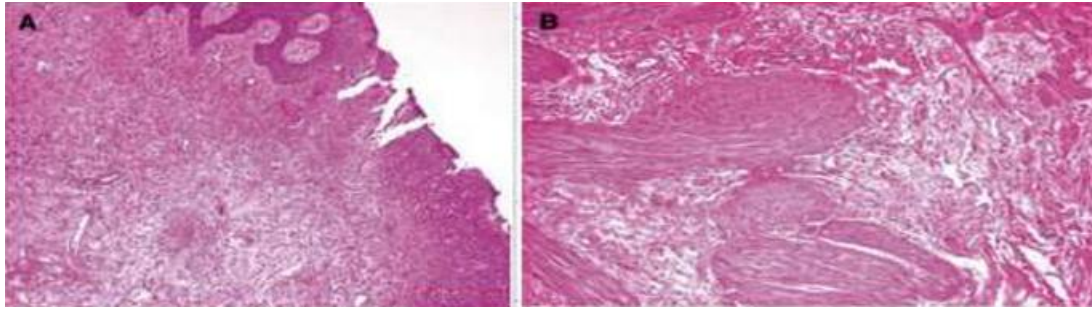


Figure 2: Histological features of the fibroepithelial polyp.

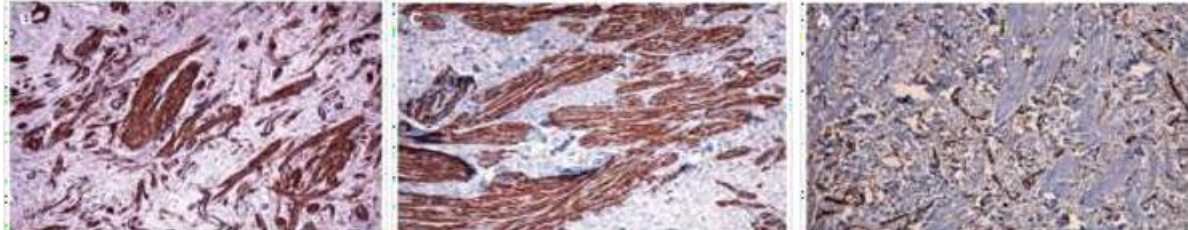


Figure 3: Immunohistochemical analysis of the polyp

3. Discussion

Fibroepithelial polyps of the anus, also referred to as hypertrophied anal papillae, are relatively common benign lesions that have received limited attention in the medical literature.² These polypoid growths consist of enlarged projections of the anal squamous epithelium and underlying connective tissue. They are thought to be acquired, triangular - shaped protrusions arising from the base of the rectal columns of Morgagni at the dentate line, often as a response to chronic irritation. In this report, we present a highly unusual case of an excessively large fibroepithelial anal polyp resulting in intestinal obstruction—a rare and previously undocumented complication.³

References

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