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STOMACH POLYP

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Abstract. Polyps in the stomach are benign neoplasms that form from the tissues of the mucous membrane and the inner walls of the organ. They can be single or multiple and can grow to large sizes. Their share among all tumors of the digestive tract is 12%. In some patients, polyps can degenerate into malignant tumors.A stomach polyp is a cluster of cells that forms on the inner surface of the stomach. It was possible to talk about stomach polyps as a rare disease 40-50 years ago. With the development of endoscopy, gastric polyps are detected in almost any endoscopic office on a daily basis.

They are usually not identified by any signs or symptoms. Occasionally, the presence of polyps may be indicated by abdominal pain, painful sensations when pressing on the abdomen, bleeding, nausea and vomiting. In most cases, they are detected accidentally during the examination for other reasons. The most common typology of gastric polyps includes: hyperplastic polyps, fundus gland polyps, and adenomatous polyps.

Keywords: sign of Gastric polyp, etiology and pathogenesis of gastric polyp, forms of Gastric Polyps,Adenomatous Gastric Polyps, Prevention of Gastric Polyps.

The cause of stomach polyps is the body's response to inflammatory processes or other disorders in the gastric mucosa. Risk factors include: age (these polyps are mainly found in people over 50 years of age), bacterial infections of the stomach (the bacterium Helicobacter pylori contributes to the development of hyperplastic and adenomatous polyps), hereditary colon cancer syndrome (familial adenomatous polyposis increases the risk of not only colon cancer, but also gastric polyps), some medications (long-term use of proton pump inhibitors for the treatment of gastroesophageal reflux disease is associated with the development of fundus gland polyps).

Gastroscopy is used to identify and determine the typology of gastric polyps. This procedure makes it possible to examine the stomach and take a tissue sample for examination in the laboratory (biopsy). After the detection of gastric polyps, further treatment is determined by their typology and size. Most stomach polyps do not become cancerous, but some types may increase the risk of stomach cancer in the future. For this reason, some polyps are removed during surgery, while others may not require surgical treatment. Treatment of gastric polyposis remains very relevant. Atypical cells revealed during histological examination of the biopsy are an indication for surgical intervention, as in gastric cancer, according to the rules of oncological radicalism. Therapeutic tactics do not depend on the size of the polyps. Polyps must be removed by endoscopic electroexcision or gastric resection according to the rules of ablasty and antiblasty.

If adenomatous polyps are found in the stomach or if the size of the polyps is more than 1 cm, their removal is recommended. If the patient suffers from gastritis caused by the bacterium Helicobacter pylori, then antibiotics may be prescribed to treat a helicobacter infection, which will also help to get rid of hyperplastic polyps.In most cases, the disease is infectious in nature and is caused by the bacterium Helicobacter Pylori. Penetrating into the mucous layer of the

stomach, it provokes the formation of erosions and ulcers. As a result, changes occur in the tissue structure, which lead to the growth of neoplasms.

There are also a number of other factors that can cause a polyp to form in the stomach. The causes are often related to:

chronic diseases of the digestive tract – gastritis, ulcers, etc.;

Unhealthy diet – an abundance of spicy, acidic or coarse foods, as well as foods with a high content of nitrites and nitrates irritate the mucous membrane;

Due to age – related changes in the body , the risk of developing neoplasms increases during aging;

harmful habits – smoking and alcohol abuse provoke structural changes in tissues;

hereditary predisposition;

Classification of polyps in the stomach:

1. Adenomatous (glandular) polyp in the stomach is an overgrowth of mucous membrane tissues, the most dangerous form of the disease, prone to degeneration into cancer.

2. Hyperplastic polyp in the stomach – formed from overgrown epithelial tissues, rarely turns into a malignant form.

The main signs of polyps in the stomach

In the initial stages, the disease often does not produce symptoms. It may be discovered accidentally during an inspection. But as the polyp in the stomach increases, the symptoms become more noticeable.:

3. Abdominal pain and cramps – usually occur shortly after eating;

4. dyspeptic disorders – heaviness in the stomach, nausea, heartburn, flatulence, vomiting, bloating, diarrhea, etc.;

5. decreased appetite;

6. dramatic weight loss;

7. Signs of anemia include weakness, pale skin, and dizziness.

In the advanced stages of the disease, gastric bleeding is possible, which can be detected by blood impurities in the vomit or feces.

A polyp in the stomach – what is dangerous, and what leads to

The neoplasm prevents food from passing through the stomach and disrupts the process of its digestion. There is also a risk of serious complications.:

8. erosions and ulcers in the area of polyp growth – accompanied by necrosis of the mucous membrane tissues;

9. stenosis (narrowing) of the opening between the stomach and intestines – disrupts the normal passage of food;

10. stomach bleeding;

11. malignancy – the cells of the formation degenerate into atypical ones, and a malignant polyp forms in the stomach

Adenomatous polyps, or adenomas, are true neoplasms that grow on the surface of the colon and are associated with a high risk of cancer. Adenomatous polyps are considered precancerous, and they are likely to develop into colon cancer. Other types of polyps that may appear in the colon are hyperplastic, which are not neoplastic in their morphological structure. The risk of their degeneration into colon cancer is unlikely.

Adenomas account for about 10% of all polyps. Most polyps (approx. 90%) — small, usually less than 1 cm in diameter; the probability of their malignant degeneration is low. The remaining 10% are adenomas larger than 2 cm, and the probability of invasive cancer is approaching 10%.

There are four types of adenomatous polyps:

Dentate adenomas, tubular, tubular-villous, villous.

Tubular adenomas -

They are the most common of the class of adenomatous polyps; they can be found anywhere in the colon. Compared to the other two types of colon polyps, they are less likely to develop into cancer.;

The risk of progression to colon cancer increases if the polyp is more than 2 cm in size and contains a large percentage of the villous component. In addition, the form of polyps is also associated with the risk of developing cancer. Thus, polyps on the stem are usually smaller in size than polyps on a wide base. The latter have a shorter pathway for the migration of invasive cells from the tumor to the submucosa and more distant structures; they are also very difficult to identify and remove. If the size of the polyps on a wide base is more than 2 cm, then most of them already contain fibrous elements, have a higher malignant potential and a tendency to recurrence (re-formation) after colonoscopic polypectomy (surgical removal of polyps).

Although tubular adenomatous polyps are not as dangerous as villous and tubular-villous adenomas, they can nevertheless become cancerous when they become large. Larger tubular adenomatous polyps have an increased risk of malignant degeneration, as they form more villous components and can become polyps on a wide base.

It is believed that if the parents have an adenomatous polyp, then the probability of developing colon cancer in children is 50% higher than in people whose parents did not have a corresponding diagnosis. At the same time, there is no method to determine the risk of tumors in patients with a family history of colon polyps. In general, approximately 6% of the population, regardless of the history of diagnosis in their families, are at risk of developing colon cancer.

A population survey to identify colon polyps, as well as to prevent their growth, is an important component in the field of national health management. The American Cancer Society has developed a number of recommendations for appropriate mass screening programs to prevent the growth of adenomatous polyps and minimize the likelihood of colon cancer. It is believed that some dietary changes may be beneficial in preventing the appearance of polyps, but there is no other way to prevent the development of polyps into a cancerous tumor other than by detecting and removing them during a medical examination.

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