

Hyperplastic Polyps

Palm Beach Pathology

Eastern Carolina Pathology

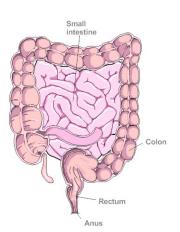
Polyps are growths that develop in the colon or the rectum. Colorectal polyps are common and may be found in approximately nine of every 10,000 persons. Polyps are usually classified into two types: adenomatous polyps (adenomas) and hyperplastic polyps. The more common hyperplastic polyps are benign and, in most circumstances, are not considered to be premalignant. A definitive distinction between the two types requires polyp removal and microscopic examination by a pathologist. The adenomatous polyps (adenomas) have an increased risk of becoming pre-malignant compared to the hyperplastic polyp. Some hyperplastic-looking polyps called serrated adenomas have a similar risk profile as adenomatous polyps (adenomas). Although many people will develop colon polyps in their lifetime, most polyps will not develop into cancer.

Hyperplastic Polyp Background Information

Colorectal cancer is the second leading cause of cancer deaths in the United States. The risk of colorectal cancer tends to increase after the age of 50. Cancer of the colon and rectum usually begins as a polyp. Although most polyps never become cancerous, virtually all colon and rectal cancers start from these benign growths.

Symptoms: Unless colon polyps are large and cause bleeding or pain, the only way to know if you have polyps is to have one or more tests that explore the surface of your colon. Most hyperplastic polyps are much smaller than adenomatous polyps.

Risk factors: Most polyps are the result from a genetic mutation in the lining of the colon. The risk of developing polyps increases with age and some individuals may have more than one polyp. The likelihood of developing polyps is also higher in patients with a family history of colorectal polyps or colorectal cancer, including inherited disorders such as Gardner's syndrome or familial adenomatous polyposis.





Follow-up and Treatment Options for Hyperplastic Polyps

Polyps are usually detected during a screening test for colon cancer or other abdominal conditions. The most common screening tests which can reveal a polyp are a colonoscopy (an examination of the large bowel with a telescope-like device), a sigmoidoscopy (an examination of the lowest part of the bowel using a flexible telescope) or a barium enema (an x-ray taken after consuming a barium liquid). A colonoscopy is now considered the best screening tool. Only a physician can determine the most appropriate treatment.

Polypectomy: A polypectomy involves the removal of the entire polyp during a colonoscopy. The tissue sample is reviewed by a pathologist to determine whether the tissue contains a cancer or other disease. A polyp that has been completely cut out will not grow back, however, some individuals tend to form multiple polyps, so there is the chance that new polyps could develop after polypectomy.

Surgery: In some instances, although not frequently, a polyp may be too large to be removed during a colonoscopy. This generally occurs usually when the size of the polyp is greater and, particularly, if the base of the polyp is broad and not well defined. In these situations, endoscopic removal can carry an unacceptably high risk of bleeding or perforation. Such polyps are also more likely to already contain cancer and removal by surgery can be the safest option to ensure that the cancer is completely removed.

Follow-up Colonoscopy: It is important to have follow up colonoscopies to monitor your condition and assure that new polyps have not developed.

Follow-up Questions to Ask Your Healthcare Provider

- Do you recommend the removal of my polyp(s)?
- Does my polyp put me at increased risk for colorectal cancer?
- Is there anything I should be doing or not doing during treatment?
- Are there any other measures I can take to reduce my risk of future polyps?
- What are the chances of recurrence after my treatment plan?

Sources for Additional Information

- American Cancer Society: www.cancer.org
- National Cancer Institute: www.cancer.gov
- CancerCare: www.cancercare.org

The content on this handout is provided to you as general information and not intended as diagnosis. Please consult with your physician regarding the essential details about your condition.







