



Kaposi sarcoma—An unusual cause of asymptomatic anemia

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A 43-year-old male underwent upper gastrointestinal (GI) endoscopy for iron-deficiency anemia (hemoglobin, 6.0 g/dL; normal > 13 g/dL) without visible blood loss. He had human immunodeficiency virus (HIV) infection (CD4+ count 65/ μ L) and was non-compliant with antiretroviral therapy (ART). No cutaneous

Biopsies were performed and histological examination showed proliferation of spindle cells with vascular spaces and positive immunohistochemical staining for human herpesvirus-8 (HHV-8). These findings were consistent with Kaposi sarcoma (KS) (Fig. 2). The patient was started on



Fig. 1 Kaposi sarcoma lesions in the gastric body

lesions was present on physical examination. Upper GI endoscopy showed several purplish polypoid lesions in the gastric body, the largest being 10 mm in diameter (Fig. 1).

☑ J. M. Costa julianamcosta87@gmail.com liposomal doxorubicin combined with ART, but he died 2 months later due to pneumonia.

KS is a vascular tumor caused by HHV-8 [1]. Gastrointestinal involvement by KS (GI-KS) is rare and mostly found in untreated, stage 3 (CD4+ count < $200/\mu L$) HIV infection and in men from HHV-8 endemic areas [1, 2]. It is typically asymptomatic and can occur in the absence of cutaneous involvement [2]. Therefore, the clinician should maintain a high index of suspicion for GI-KS in HIV-infected patients. Endoscopic appearance is variable as KS lesions can be flat, polypoid, nodular, or volcano-like ulcers [3]. Management is usually palliative, combining ART with radiation or chemotherapy, and prognosis is poor with a 6-month survival of 40% [2].



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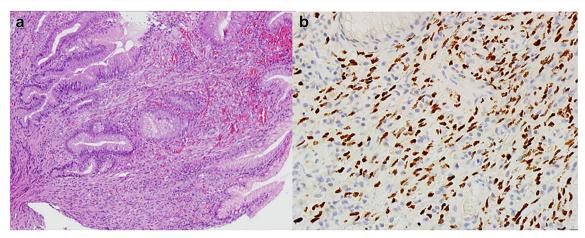


Fig. 2 a Kaposi sarcoma in a gastric biopsy—proliferation of spindle cells surrounding slit-like spaces in the lamina propria (H&E, \times 100). **b** The spindle cells are positive for HHV-8 (\times 400)

Compliance with ethical standards

Conflict of interest JMC, TL, SDC, RG, and BA declare that they have no conflict of interest.

Informed consent Informed consent was obtained from the patient who was referred in this report.

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