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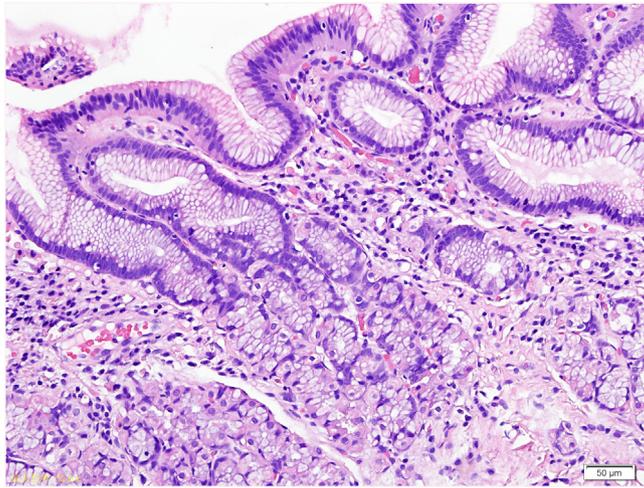


Fig. 1. High-power image showing the surface mucinous foveolar epithelium and underlying glands containing parietal and chief cells (original magnification, 200×; haematoxylin–eosin stain).

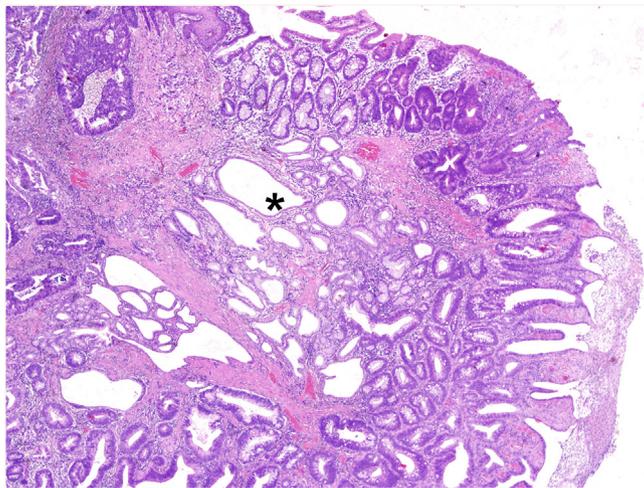


Fig. 2. Low-power image showing the heterotopic gastric mucosa with continuous progression from intestinal metaplasia to epithelial dysplasia to adenocarcinoma (original magnification, 40×; haematoxylin–eosin stain). Note the remnants of heterotopic gastric mucosa (*).

Funding

None.

Competing interests

None.

Ethical approval

Not applicable.

Patient consent

Not required.

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Response to “Intestinal-type adenocarcinoma arising from gastric heterotopia of the oral tongue”

We are pleased that our recently reported case of primary intestinal-type adenocarcinoma of the tongue aroused the interest of other pathologists at our institution¹. Our article focused on the clinical characteristics and therapeutic methods applied in our patient’s case, as well as those applied in other cases of intestinal-type adenocarcinoma (ITAC) reported previously in the literature.

As stated in our article, several theories concerning the histological origin of benign gastrointestinal glandular epithelium at the base of the tongue have been offered. One theoretical source is salivary gland epithelium that undergoes metaplasia². The theory that we favour – and that appears to be supported by immunohistochemistry in our patient’s case – is that the lingual glandular tissue is choriostoma-tous as a result of its entrapment at the base

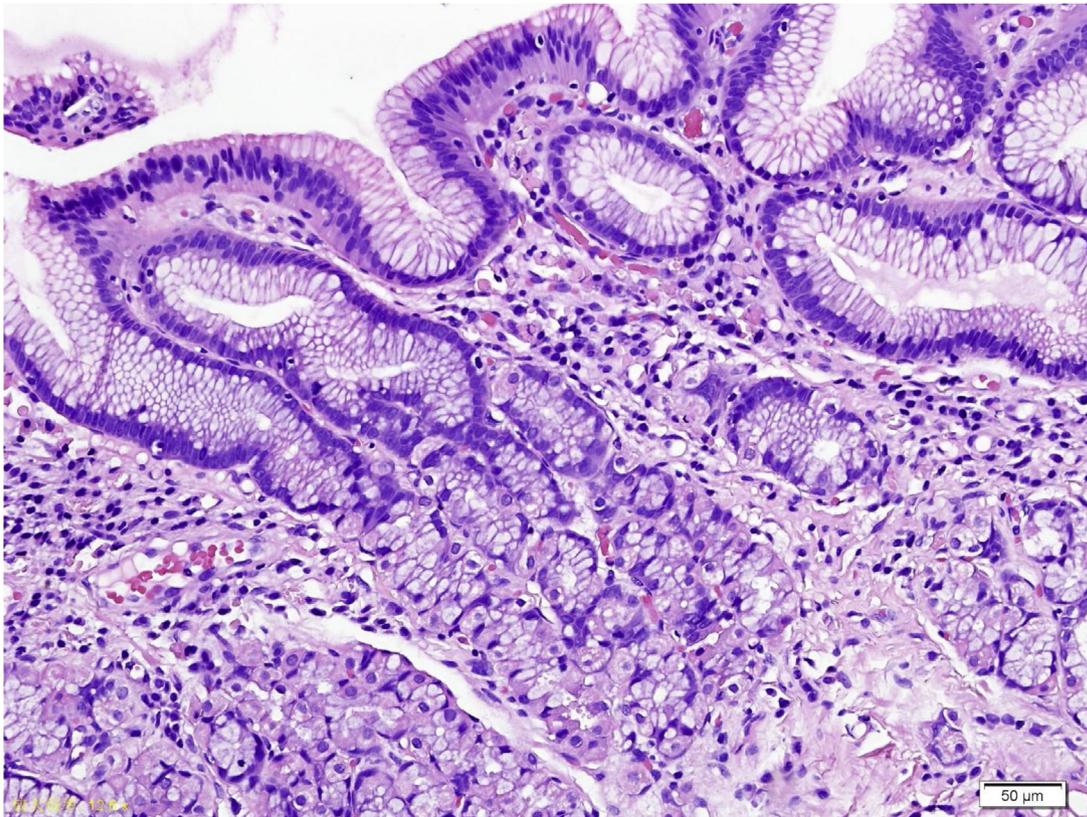


Fig. 1. High power image shows the surface mucinous foveolar epithelium and underlying 86 glands containing parietal and chief cells (original magnification, 200 \times ; haematoxylin-eosin 87 stain).5

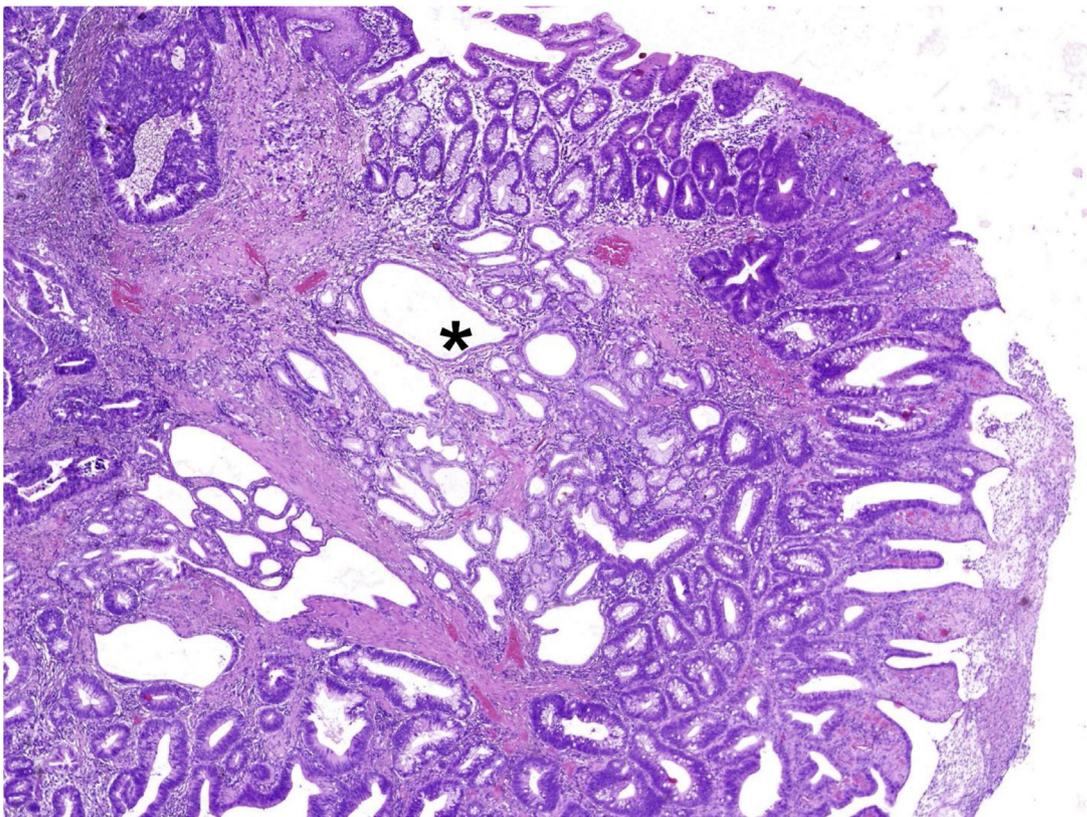


Fig. 2. Low pow 88 ered image shows the heterotopic gastric mucosa with continuous 89 progression from intestinal metaplasia, epithelial dysplasia to adenocarcinoma (original 90 magnification, 40 \times ; haematoxylin-eosin stain). Note the remnants of heterotopic gastric 91 mucosa (*).

of the tongue during embryonic development³.

Berg et al.⁴ recently demonstrated histological evidence of metaplasia of the salivary epithelium in ITAC of the tongue. On comparing the findings presented in our report with those reported in the paper of Berg et al., Yang and Chen, researchers at our institution, reviewed the tissue sections from our case and performed additional immunohistochemical examinations. Included with their letter are two conventionally stained photomicrographs (Figs 1 and 2). They state that parietal and chief cells (indicating gastric epithelium) are shown in Fig. 1. They therefore interpret the findings as indicative of heterotopic gastric mucosa, suggesting that our case is derived from gastric heterotopia specifically, rather than salivary gland ductal epithelium.

Funding

None.

Competing interests

None declared.

Ethical approval

Not required.

Patient consent

Written patient consent was obtained to publish the clinical photographs.

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