

# Letter to the Editor

Adán José Lúquez Mendiola.<sup>1</sup>

<sup>1</sup> Internist and Gastroenterologist, National University of Colombia. GutMedica Center of Digestive Diseases. Bogotá, Colombia.

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Dear Editor:

I read the article published in the last volume of the journal entitled «**A Case Report of Cavernous Hemangioma as a Cause of Occult Gastrointestinal Bleeding**» with interest. (1) It is important to discuss the recently published proposal to modify terminology including the definition of obscure gastrointestinal bleeding due to «probable small bowel bleeding». (2, 3) This change is being considered because of the great advances in imaging studies of the small intestine, especially the endoscopic videocapsule which has become more available in our environment in recent years. (4)

The case reported would be described as a manifest obscure gastrointestinal bleeding in the older terminology rather than manifest occult gastrointestinal bleeding which is a contradictory concept. Classically, gastrointestinal bleeding has been defined as obscure when its source was unknown after upper digestive tract endoscopy and colonoscopy, and this in turn had been divided into obscure-occult and obscure-overt digestive bleeding. (3) Gastrointestinal bleeding refers to manifest visible bleeding such as melena and hematochezia and occult gastrointestinal bleeding, which was not present in this patient, refers to iron deficiency anemia or unexplained positive results of a stool test for occult blood. (2) For these reasons, the term obscure digestive bleeding is currently reserved for patients for whom the source of bleeding has not been found after studies of the gastrointestinal tract including the small intestine have been performed. (5)

With feelings of admiration and respect,

Adán José Lúquez Mendiola, MD

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## Response to the letter to the Editor

Juan Ramón Abello Reyes,<sup>1</sup> Diego Mauricio Gómez Ramírez.<sup>2</sup>

<sup>1</sup> Pathology specialist, Clínica Farallones. Cali, Colombia.

<sup>2</sup> Gastroenterology and digestive endoscopy specialist, Clínica Farallones. Cali, Colombia.

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Dear Editor:

Regarding the letter to the editor received that you received regarding our article, our response is the following:

Dear Doctor Adán José Lúquez Mindiola, MD

The proper term is “manifest obscure gastrointestinal bleeding” in the light of our days.

I must recognize that the semantic concept mentioned by you is the most successful. I appreciate your contribution to the article and your interest in thoroughly reading it.

Cordially,

Dr Juan Ramón Abello Reyes, Diego Mauricio Gómez Ramírez and collaborators.