

# Sessile Serrated Lesions

A Practical Guide For Patients



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## Introduction: Sessile Serrated Lesions

Sessile Serrated Lesions (SSLs) are a type of polyp found in the colon that can increase the risk of colorectal cancer. Unlike traditional adenomas, SSLs are flat, sessile (without a stalk), and typically located in the right side of the colon. These lesions are often difficult to detect through standard colonoscopy due to their flat appearance. SSLs can progress slowly into cancer if left untreated. Early detection through colonoscopy is essential for preventing cancer. Treatment usually involves polyp removal during a colonoscopy, with regular follow-up screenings to monitor for recurrence or new lesions.

### Key Takeaways

- **Sessile Serrated Lesions (SSLs) are flat, stalkless polyps that can increase the risk of colorectal cancer.**
- **They are often located in the right side of the colon and are harder to detect.**
- **SSLs can slowly progress into cancer if not removed.**
- **Early detection through colonoscopy is crucial for prevention.**
- **Regular follow-up screenings are recommended after SSL removal to monitor for recurrence.**



# What Causes Sessile Serrated Lesions?

## Known Causes:

- **Genetic Factors:** Inherited genetic mutations, such as those in the BRAF gene, are associated with an increased risk of SSLs and colorectal cancer.
- **Chronic Inflammation:** Long-standing inflammation, such as in conditions like inflammatory bowel disease, may increase the likelihood of SSL formation.
- **Diet:** A diet high in red and processed meats, and low in fiber, can contribute to the development of polyps, including SSLs.
- **Age:** The risk of developing SSLs increases with age, especially after 50.
- **Family History:** A family history of colorectal cancer or polyps increases the risk of SSLs.



## Common Signs & Symptoms

Sessile serrated lesions (SSLs) are often asymptomatic and may not cause noticeable symptoms. However, in some cases, they can lead to rectal bleeding, changes in bowel habits, abdominal discomfort, or unexplained weight loss. Regular screenings are key for detection.

### Core Symptoms Include:

- Rectal Bleeding: Occasional blood in the stool or on toilet paper.
- Changes in Bowel Habits: Including diarrhea, constipation, or alternating between the two.
- Abdominal Discomfort: Mild cramping or bloating in the abdominal area.
- Unexplained Weight Loss: Often seen in more advanced stages or when lesions are left untreated.

### Severe cases can also cause:

- Obstruction: Large SSLs can cause partial bowel obstruction, leading to pain and difficulty passing stool.
- Colorectal Cancer: If left untreated, SSLs can progress to colorectal cancer, particularly in the right side of the colon.
- Chronic Bleeding: Persistent bleeding from the lesions can lead to anemia.
- Perforation: In rare cases, untreated lesions may cause the colon to tear or perforate, leading to infection.

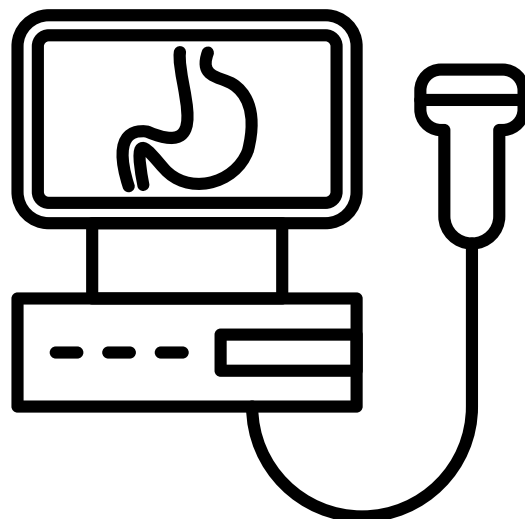


## Diagnosis & Medical Testing

Diagnosis of Sessile Serrated Lesions typically involves colonoscopy, where the lesions can be directly visualized. Endoscopic imaging techniques such as high-definition or chromoendoscopy may be used for better detection. Biopsy of the lesions is often performed to confirm diagnosis.

### Diagnostic Tools:

- Colonoscopy: The primary diagnostic tool, allowing direct visualization of Sessile Serrated Lesions in the colon.
- High-definition Endoscopy: Provides clearer images for better detection of flat lesions, which may be difficult to identify.
- Chromoendoscopy: A technique that involves applying a special dye during colonoscopy to enhance the visibility of abnormal tissue.
- Endoscopic Ultrasound: Occasionally used to assess the depth of tissue involvement in cases of advanced lesions.
- Biopsy: A tissue sample is taken during colonoscopy to confirm the presence of SSLs and check for any cancerous changes.



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A diet rich in fiber, fruits, vegetables, and whole grains may help reduce the risk of Sessile Serrated Lesions and colorectal cancer. Limiting red and processed meats, alcohol, and unhealthy fats while maintaining a healthy weight can also be beneficial.

### Key Insights:

- **Sessile Serrated Lesions (SSLs) are often asymptomatic, making them difficult to detect without regular screenings like colonoscopy.**
- **Genetic factors and diet play significant roles in the development of SSLs, with high-risk individuals requiring more frequent monitoring.**
- **SSLs can progress to colorectal cancer if left untreated, particularly in the right colon.**
- **Early detection through advanced colonoscopic techniques like high-definition endoscopy and chromoendoscopy is key to preventing cancer.**
- **Maintaining a fiber-rich diet and healthy lifestyle may help reduce the risk of developing SSLs and other colorectal conditions.**



## Medications & Treatment Options

There are no specific medications for treating Sessile Serrated Lesions. Treatment typically involves polypectomy, where SSLs are removed during a colonoscopy. In cases of recurrence, regular follow-up colonoscopies are recommended. Aspirin or NSAIDs may be considered for prevention in some cases.

### Treatment Options

- **Polypectomy:** The most common treatment, where the Sessile Serrated Lesion is removed during a colonoscopy.
- **Regular Colonoscopies:** After removal, follow-up screenings are essential to check for recurrence of SSLs or other abnormalities.
- **Aspirin/NSAIDs:** In some cases, low-dose aspirin or nonsteroidal anti-inflammatory drugs (NSAIDs) may be recommended for preventing the growth of new polyps.
- **Surgical Resection:** In rare, severe cases, surgery may be required if SSLs cause complications like obstruction or have progressed to cancer.
- **Dietary Changes:** A high-fiber, plant-based diet may help reduce the risk of recurrence and promote overall colon health.



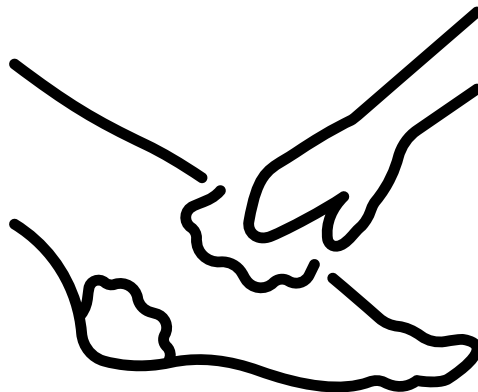


## Advanced Therapies & Procedures

Advanced therapies for Sessile Serrated Lesions include endoscopic mucosal resection (EMR) for larger or difficult-to-remove lesions, radiofrequency ablation for advanced cases, and laparoscopic surgery in cases of significant cancer progression. Regular screenings are crucial for early detection and management.

### Therapy Options:

- Polypectomy: Removal of Sessile Serrated Lesions during colonoscopy, the most common and effective treatment.
- Endoscopic Mucosal Resection (EMR): A procedure for larger or more difficult lesions, where the tissue is lifted and removed through endoscopy.
- Radiofrequency Ablation: Used in some cases to treat larger or recurrent lesions by applying heat to destroy abnormal tissue.
- Surgical Resection: In rare, severe cases, surgery may be necessary if the lesion is too large or has progressed to cancer.
- Aspirin or NSAIDs: May be recommended for some individuals as a preventive measure to reduce polyp growth and recurrence.



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# Coping With Sessile Serrated Lesions

Coping with Sessile Serrated Lesions involves regular colonoscopies to monitor for recurrence, adopting a high-fiber diet, and avoiding smoking and excessive alcohol. Maintaining a healthy weight, managing stress, and adhering to prescribed medications or treatments can also help manage the condition.

## Practical Strategies

- **Regular Screenings:** Schedule colonoscopies as recommended by your doctor to monitor and detect any new lesions.
- **Dietary Modifications:** Focus on a high-fiber diet rich in fruits, vegetables, and whole grains to support colon health.
- **Limit Red Meat:** Reduce intake of processed meats and high-fat foods, which may increase polyp risk.
- **Maintain a Healthy Weight:** Achieve and maintain a healthy weight to reduce colorectal cancer risk.
- **Exercise:** Regular physical activity can help reduce inflammation and promote overall digestive health.
- **Avoid Smoking and Limit Alcohol:** These lifestyle changes can reduce the risk of lesions and cancer development.





## **Q1: What are Sessile Serrated Lesions?**

**A:** They are flat polyps in the colon that can lead to colorectal cancer.

## **Q2: How are Sessile Serrated Lesions diagnosed?**

**A:** Through colonoscopy, high-definition endoscopy, and biopsy for confirmation of the lesion type.

## **Q3: Can Sessile Serrated Lesions be treated?**

**A:** Yes, with lifestyle changes such as weight loss, a healthy diet, regular exercise, and managing underlying conditions, fatty liver can often be reversed.

## **Q4: What is the risk of Sessile Serrated Lesions?**

**A:** If untreated, they can progress to colorectal cancer, especially in the right side of the colon.



## Take Action

Take action by scheduling regular colonoscopies to detect and remove Sessile Serrated Lesions early. Adopt a high-fiber diet, avoid smoking and excessive alcohol, and maintain a healthy weight. Follow your doctor's recommendations for monitoring and prevention of recurrence.

For additional resources, visit [GastroDoxs.com](https://GastroDoxs.com).

**Your health starts with knowledge.  
Take the first step today!**

**SCHEDULE AN APPOINTMENT**



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