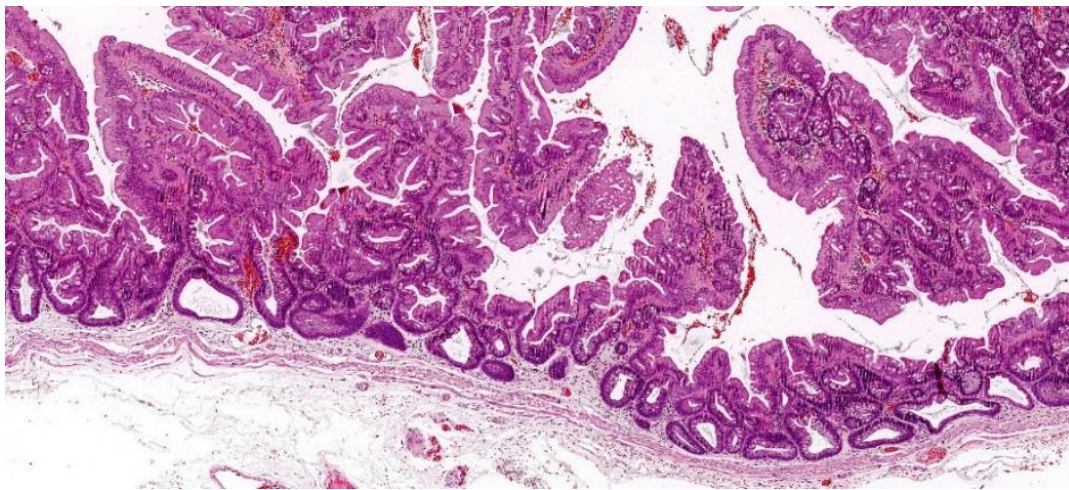


## Traditional serrated adenoma

The traditional serrated adenoma (TSA) is a rare polyp of the serrated neoplasia pathway (0.9% of colorectal polyps). Similar to the sessile serrated adenoma (SSA), they progress through a phase of overt cytological dysplasia before the development of malignancy. Two molecular subtypes are recognised, namely *BRAF* and *KRAS* mutated. *BRAF* mutated TSAs arise in SSAs or hyperplastic polyps whereas *KRAS* mutated TSAs have no known precursor. Both give rise to aggressive molecular subtypes of colorectal carcinoma.



**Definition:** A neoplastic polyp characterised by eosinophilic cells, ectopic crypt formations and slit-like epithelial serrations.

**Risk factors:** Older age

**Clinicopathological features:** Mean age 62, predominantly distal, mean size 10.6mm, distal polyps are more likely to be protuberant, whereas proximal polyps are often flat

**Molecular biology:** *BRAF* mutation (67%), *KRAS* mutation (22%)

**Risk of malignant progression:** High

**Risk of metachronous carcinoma:** High; odds ratio 4.84; risk of carcinoma at ten years 4.5%

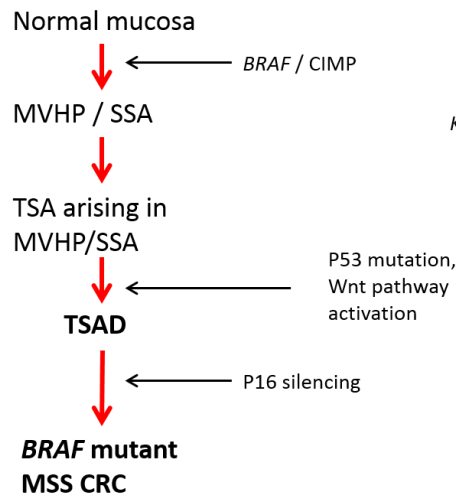
**Surveillance guidelines:** Surveillance colonoscopy is recommended at 3 years.

**Note:** At present there are no guideline to direct surveillance in TSAs with superimposed cytological dysplasia. In our experience these are very aggressive polyps and require complete removal with close surveillance.

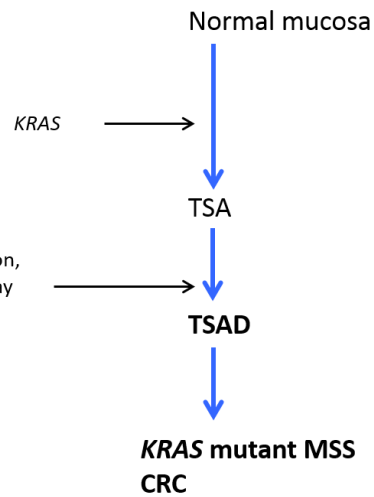
**Cancer outcome:** TSAs can give rise to two major molecular subtypes of carcinoma:

1. *BRAF* mutated, microsatellite stable carcinoma – this is the most aggressive molecular subtype of colorectal adenocarcinoma
2. *KRAS* mutated, microsatellite stable carcinoma – this is also an aggressive subtype of colorectal adenocarcinoma

### ***BRAF* pathway**



### ***KRAS* pathway**



### **Further reading:**

Bettington et al; A clinicopathological and molecular analysis of 200 traditional serrated adenomas. *Modern Pathology* 2015;48:414-427

Rune et al; Increased risk of colorectal cancer development among patients with serrated polyps. *Gastroenterology* 2015, epub ahead of print.