



## CLINICAL IMAGE

# Dieulafoy's lesion: A case report<sup>☆</sup>



## Lesión de Dieulafoy: reporte de un caso

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Received 1 April 2015; accepted 1 May 2015

### Dieulafoy's lesion

A 26-year-old man suffered from chronic alcoholism and had multiple body tattoos and perforations. Illness began 5 days prior to hospital admission with hematemesis and recurrent melena and he presented with hemodynamic decompensation and shock. The patient stated that he did not take nonsteroidal anti-inflammatory agents or other drugs and he had no signs of peptic acid disease. Physical examination revealed blood pressure of 80/40 mmHg, heart rate 130 min, generalized pallor, diaphoresis, and no hepatopathy stigmata. Laboratory work-up reported: hemoglobin 3.62 mg/dl, MCV 93.2  $\mu^3$ , MCH 34.2 g/dl, leukocytes 7,470  $\text{mm}^3$ , and platelets 151,000  $\text{mm}^3$ . Blood chemistry showed normal serum electrolytes and liver function tests; AcHC, HBsAg, and HIV were negative. Liver ultrasound was normal. Endoscopy revealed Dieulafoy's lesion in the gastric fundus at 4 cm from the cardia with active bleeding (figs. 1 and 2). Sclerotherapy with polidocanol at 1% was performed and bleeding was controlled (fig. 3). The patient remained asymptomatic and was released one week later with Hb of 9.2 mg/dl.

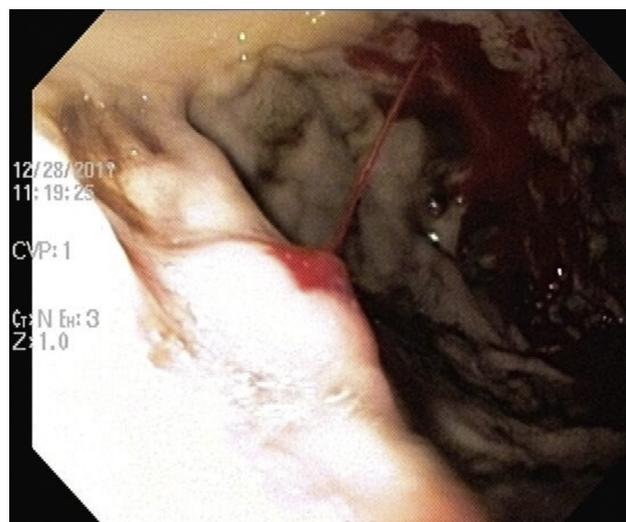
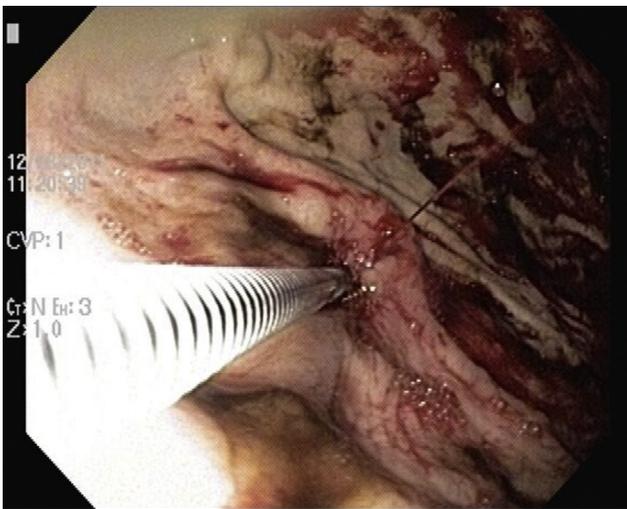


Figure 1 Active bleeding.

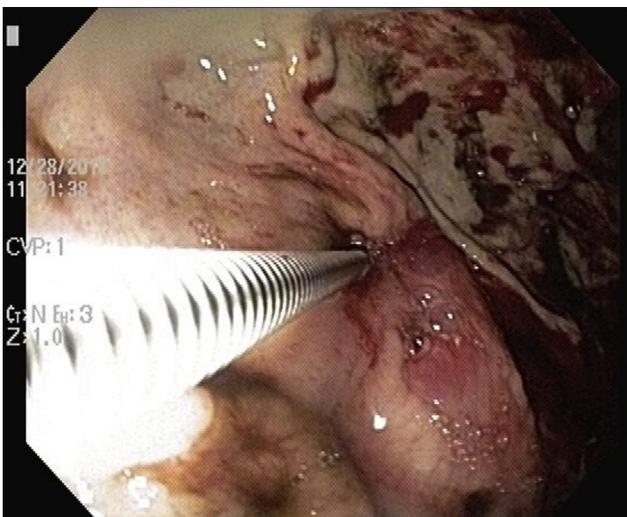
<sup>☆</sup> Please cite this article as: Rodríguez-Jacobo S, Jacobo-Karam JS. Lesión de Dieulafoy: reporte de un caso. Revista de Gastroenterología de México. 2015;80:278–279.

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**Figure 2** Sclerosis of the Dieulafoy's lesion.



**Figure 3** Control of bleeding.

## Ethical responsibilities

**Protection of persons and animals.** The authors declare that no experiments were performed on humans or animals for this study.

**Data confidentiality.** The authors declare that they have followed the protocols of their work center in relation to the publication of patient data.

**Right to privacy and informed consent.** The authors have obtained the informed consent of the patients and/or subjects referred to in the article. This document is in the possession of the corresponding author.

## Financial disclosure

No financial support was received in relation to this study/article.

## Conflict of interest

The authors declare that there is no conflict of interest.