



CLINICAL IMAGE IN GASTROENTEROLOGY

## Dissecting intramural hematoma of the esophagus: An unusual endoscopic finding<sup>☆</sup>



### Hematoma disecante del esófago: un hallazgo endoscópico inusual

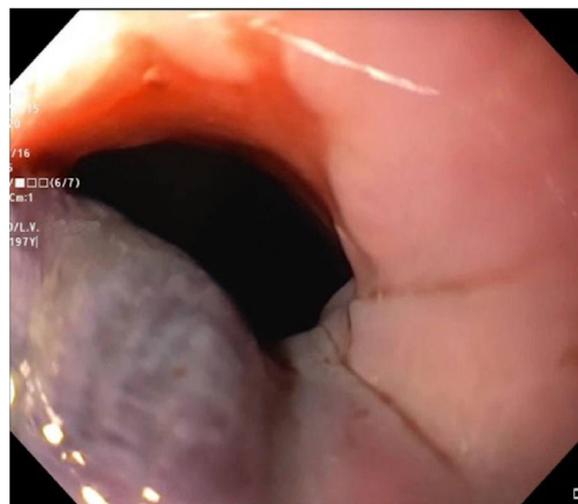
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An 83-year-old woman, under treatment with acetylsalicylic acid as primary prevention for heart disease and hemodynamically stable, was admitted to our hospital after 2 episodes of hematemesis. Upper gastrointestinal endoscopy revealed a linear violet mass partially occupying the esophageal lumen at the esophagogastric junction (Fig. 1). A contrast-enhanced chest computed tomography scan identified concentric thickening of the upper and middle thirds of the esophagus associated with a dilated anomalous vessel in the muscle wall of the middle third of the esophagus (Fig. 2). Contrast medium extravasation in the muscle layer of the middle third of the esophagus secondary to active bleeding was shown in the late arterial phase of the study (Fig. 3). Upper gastrointestinal endoscopy was repeated 3 days after the initial presentation, revealing mucosal dissection and tear in the middle third of the esophagus (Fig. 4). Dissecting hematoma of the esophageal wall was diagnosed. It is a rare entity, whose risk factors



**Figure 1** Upper gastrointestinal endoscopy revealing a linear violet mass partially occupying the esophageal lumen at the esophagogastric junction.

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include the use of antiplatelet and anticoagulant agents, and common symptoms are chest pain, dysphagia, or hematemesis. Our patient was treated conservatively, beginning a



**Figure 2** Chest axial tomography scan identifying the concentric thickening of the upper and middle thirds of the esophagus, associated with a dilated anomalous vessel in the muscle wall of the middle third of the esophagus in the arterial phase of the study.

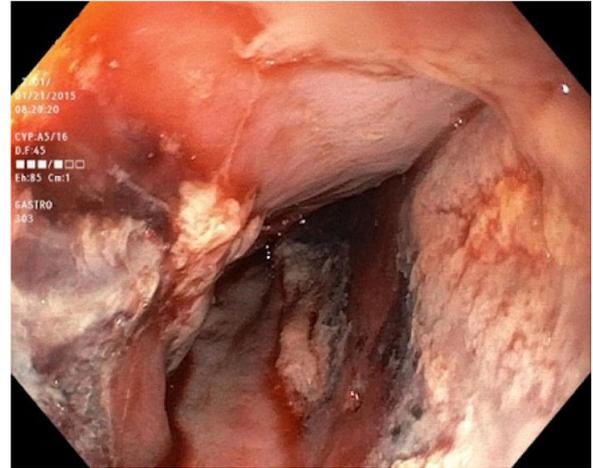


**Figure 3** Chest axial tomography scan showing contrast medium extravasation in the muscle layer of the middle third of the esophagus secondary to active bleeding.

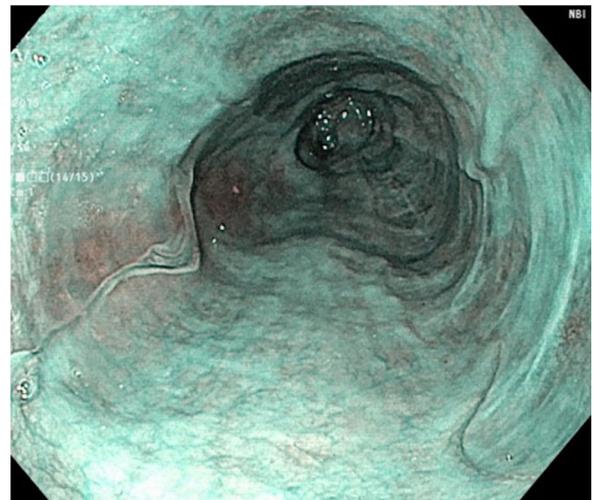
regimen of proton pump inhibitors and suspension of the acetylsalicylic acid. Chromoendoscopy 3 weeks later showed re-epithelialization of the mucosa and spontaneous resolution of the intramural hematoma (Fig. 5).

### Ethical disclosures

The authors declare that no experiments were performed on humans or animals for this study.



**Figure 4** Upper gastrointestinal endoscopy revealing the dissection of and a small tear in the mucosa with residual blood in the middle third of the esophagus.



**Figure 5** Chromoendoscopy 3 weeks after the initial presentation, showing re-epithelialization of the mucosa and spontaneous resolution of the esophageal hematoma.

The authors declare that they have treated all patient data with confidentiality and anonymity, following the protocols of their work center.

### Financial disclosure

No financial support was received in relation to this article.

### Conflict of interest

The authors declare that there is no conflict of interest.