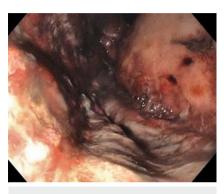
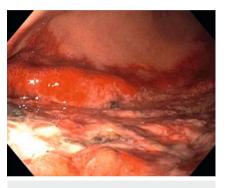
Gastric ischemia and portal vein thrombosis in a COVID-19-infected patient

A 51-year-old man admitted with acute respiratory failure from a SARS-CoV-2 infection had large volume of bloody output via orogastric tube following initiation of heparin for a lower extremity deep vein thrombosis. Esophagogastroduodenoscopy revealed diffuse and severe mucosal ischemia involving the gastric fundus (> Fig. 1), greater curvature, and posterior wall of the gastric body and antrum (▶Fig.2) (▶Video 1). The anterior gastric wall and duodenum appeared normal. Computed tomography (CT) angiogram of the abdomen revealed gastric pneumatosis (> Fig. 3), a non-occlusive thrombus in the right and left portal veins, and portal venous gas (> Fig. 4). The small bowel and colon appeared normal. In addition to management of the underlying COVID infection and respiratory complications, management included nasogastric decompression and intravenous heparin. A repeat abdominal CT 1 week later showed resolution of the intramural gastric and portal venous gas, and no residual portal vein thrombosis (▶ Fig. 5).

Gastrointestinal tract involvement, ranging from minor symptoms to small bowel ischemia, has been reported with the SARS-CoV-2 virus, which may be due to a high surface expression of angiotensin-converting enzyme 2 (ACE2) receptors on gastric cells and enterocytes [1, 2]. The underlying mechanism of small bowel ischemia is not known but might result from direct viral infiltration via ACE2 receptors on enterocytes and endothelial cells, complement-mediated small vessel thrombosis, non-occlusive mesenteric ischemia, or systemic coaqulopathy [3,4]. Gastric ischemia is a rare condition that results from vascular insufficiency due to local or systemic disorders and is associated with poor clinical outcomes if not recognized and treated early [5]. Our patient had gastric ischemia and portal vein thrombosis in the setting of a COVID-19 infection in the absence of other thromboembolic risk



► Fig. 1 Mucosal changes of ischemia involving entire gastric fundus.



➤ Fig. 2 Mucosal changes of ischemia involving greater curvature with sparing of anterior wall.





▶ Video 1 Esophagogastroduodenoscopy findings of gastric mucosal ischemia with normal duodenum in the setting of COVID-19 infection.

factors. Based on a review of the literature, we found no reported cases of COVID-19-associated gastric ischemia. A high index of suspicion may result in early recognition of this complication and treatment with anticoagulation.

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Competing interests

The authors declare that they have no conflict of interest.

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► **Fig. 3** Gastric pneumatosis seen on computed tomography angiogram.



▶ Fig. 4 Non-occlusive thrombus in the right and left portal veins, and portal venous gas on computed tomography angiogram.



► Fig. 5 Radiologic resolution of intramural gastric and portal venous gas, and portal vein thrombosis.

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