Esophageal Crohn’s disease

Esophageal involvement in Crohn’s disease is uncommon event, especially solitary esophageal Crohn’s disease, with an incidence ranging from 0.3% to 2% [1–3]. We report a case of solitary esophageal Crohn’s disease.

A 46-year-old Chinese woman was admitted to hospital in April 2007, presenting with a history of continuous mouth ulcers, pain on swallowing, and chest pain; she had been unable to take solid food for 5 months. Gastroscopy revealed one huge ulcer in the esophagus, located 28–33 cm from the upper incisors and around two-thirds of the circumference, with its base of a cobblestone appearance (Fig. 1a). Histological examination of biopsy specimens from the ulcer margin revealed chronic inflammation. Endoscopic ultrasonography showed a heterogeneous echo in the esophageal wall with strand-like hyperechoic areas. Two enlarged lymph nodes 3–4 mm in diameter were observed as a low-echo signal. The thickness of the esophageal wall was 15.4 mm. After antituberculosis therapy, the lesion spread to the whole circumference with a more obvious cobblestone-like ulcer base. After appropriate treatment, the ulcer disappeared and the injured mucosa was repaired with only a scar left.

Endoscopy_UCTN_Code_CCL_1AB_2AC_3AZ

G.-C. Lou1, J.-M. Yang1, W. Huang1, J. Zhang1, B. Zhou2
1 Department of Gastroenterology, Zhejiang Provincial People’s Hospital, Hangzhou, China
2 Harvard Stem Cell Institute, Children’s Hospital Boston and Harvard Medical School, Boston, Massachusetts, USA

References

Bibliography
Endoscopy 2009; 41: E257
© Georg Thieme Verlag KG Stuttgart · New York · ISSN 0013-726X

Corresponding author
J.-M. Yang, MD
Department of Gastroenterology
Zhejiang Provincial People’s Hospital
Hangzhou 310014
China
Fax: +86-571-85131448
jianminyang@hotmail.com

Lou GC et al. Esophageal Crohn’s disease... Endoscopy 2009; 41: E257