| Images in Focus

Esophageal Crohn's Disease With Esophagopleural Fistula

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References

- Achenbach H, Lynch JP, Dwight RW. Idiopathic ulcerative oesophagitis. N Engl J Med 1956; 255: 456 – 9
- Cynn W, Chon H, Gureghian PA, Levin BL. Crohn's disease of the esophagus. Am J Roentgenol 1975; 125: 359 – 64
- Gharhremani GG, Gore RM, Breuer RI, Larson RH. Oesophageal manifestations of Crohn's disease. Gastrointest Radiol 1982; 7: 199 – 203
- Steel A, Dyer NH, Matthews HR. Cervical Crohn's with oesophago-pulmonary fistula. Postgrad Med J 1988; 64: 706–9
- Mathis G. Crohn's disease of the esophagus: dilation of stricture fibrin sealing of fistulas. Endoscopy 1994; 26: 508



Figure 1 Intramural fistula in the distal third of the esophagus



Figure 2 Oesophagopleural fistula secondary to Crohn's disease

Fistulas to the bronchi or mediastinum in esophageal Crohn's disease are rare. Only five such cases have been reported. Diagnosis is by barium swallow with water-soluble contrast. Endoscopic findings are as usual in Crohn's disease, but endoscopic ultrasonography can demonstrate intramural and perimural echopoor bands corresponding to fistulas.

We report here a 69-year-old woman with Crohn's disease who developed an esophagopleural fistula in the lower third of the esophagus and secondary empyema. She was successfully treated with intercostal drainage, antimicrobials, and sulfasalazine.