

Herpes simplex esophagitis presenting as acute necrotizing esophagitis (“black esophagus”) in an immunocompetent patient

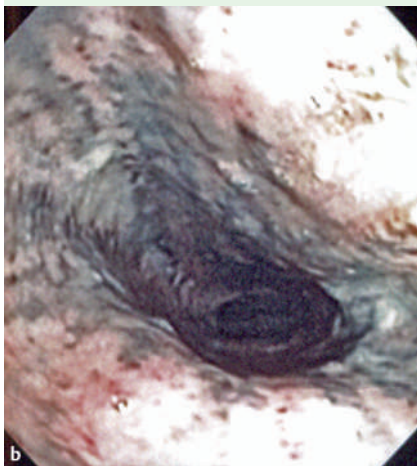
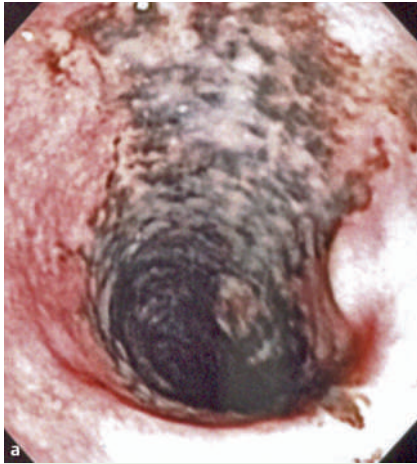


Fig. 1 a, b Endoscopic images showing “black esophagus” (necrotizing esophagitis).

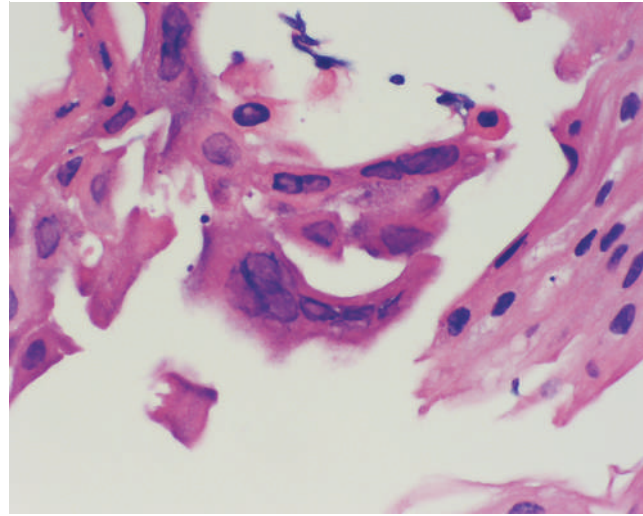


Fig. 2 High-power photomicrograph showing multinucleated giant cells with intranuclear inclusion bodies, typical of herpes esophagitis.



Fig. 3 Repeat esophagoscopy showed disappearance of the black lesions.

“Black esophagus” is a rare condition which is defined as a dark pigmentation of the esophagus seen during endoscopy, associated with histologic mucosal necrosis. We report a case of proven herpes simplex esophagitis causing black esophagus in an immunocompetent patient. A 54-year-old man with a history of well-controlled schizophrenia and living in an assisted-living facility for the mentally ill was admitted to the hospital because of coffee-ground emesis and melena. The patient was hemodynamically stable on initial evaluation. His hematocrit dropped from 43% to 33% in 12 h. Emergency upper endoscopy showed grade D esophagitis with blackish discoloration of the mucosa, mainly affecting the lower third

of the esophagus (● Fig. 1). Esophageal biopsy showed multinucleated giant cells with Cowdry type A intranuclear inclusion bodies in epithelial cells, characteristic of herpes esophagitis (● Fig. 2). Serologic testing (IgG antibodies) for herpes simplex virus 1 was positive. The patient was treated with intravenous fluid therapy, sucralfate by mouth, and intravenous esomeprazole 40 mg twice a day. Repeat upper endoscopy after 1 week showed healing of the mucosa except for a few tiny superficial ulcers in the esophagus (● Fig. 3).

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S. Nagri¹, R. Hwang², S. Anand¹, J. Kurz³

¹ Department of Gastroenterology, Brooklyn Hospital Center, Brooklyn, New York, USA

² Department of Pathology, St. Barnabas Hospital, Bronx, New York, USA

³ Department of Gastroenterology, St. Barnabas Hospital, Bronx, New York, USA

Bibliography

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Corresponding author

S. Nagri, MD

Department of Gastroenterology

Brooklyn Hospital Center

121 Dekalb Ave

Brooklyn

NY 11201

USA

Fax: +1-347-436-4451

Krishna1973@yahoo.com