A 41-year-old female patient admitted herself to the emergency room with dysphagia 18 hours after ingesting a tablet of paracetamol. She had suffered from multiple episodes of dysphagia before. As shown in Fig. 1, an upper gastrointestinal series radiograph taken after admission revealed obstruction of the proximal third of the esophagus. Emergency esophagoscopy revealed a dilated esophagus and the tablet at the end of the oral third of the esophagus (Fig. 2a). After the tablet was gently mobilized, a membranous stricture and moderate hemorrhage became visible (Fig. 2b). The patient subsequently developed chest pain, and computed tomography (Fig. 3) showed mediastinal air consistent with foreign body retention.

Endoscopy_UCTN_Code_CCL_1AB_2AC_3AH

Paracetamol-induced perforation of the esophagus in a patient with eosinophilic esophagitis

A 41-year-old female patient admitted herself to the emergency room with dysphagia 18 hours after ingesting a tablet of paracetamol. She had suffered from multiple episodes of dysphagia before. As shown in Fig. 1, an upper gastrointestinal series radiograph taken after admission revealed obstruction of the proximal third of the esophagus. Emergency esophagoscopy revealed a dilated esophagus and the tablet at the end of the oral third of the esophagus (Fig. 2a). After the tablet was gently mobilized, a membranous stricture and moderate hemorrhage became visible (Fig. 2b). The patient subsequently developed chest pain, and computed tomography (Fig. 3) showed mediastinal air consistent with foreign body retention.

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Spahn TW et al. Paracetamol-induced perforation of the esophagus... Endoscopy 2010; 42: E31–E32
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