Spontaneous intramural esophageal hematoma

Dear Editor,

A 79-year-old woman with arterial hypertension and diabetes mellitus type II, presented with chest pain associated with persistent episodes of hematemesis.

Clinical examination and laboratory tests were normal. In view of the blood-stained vomitus, the patient underwent an upper gastrointestinal endoscopy which revealed a large maroon-colored column extending from 20 cm proximally from the incisors to just beyond the gastroesophageal junction (GEJ), causing partial occlusion of the lumen. A false lumen was also noted (Figures 1A and 1B). Contrast esophagogram was positive for intramural dissection (Figure 1C).

A contrast-enhanced computed tomography (CT) of the chest and upper abdomen revealed an asymmetric mural thickening involving a long segment of the esophagus, extending from approximately T2–T3 vertebral level, up to the T12 level close to the diaphragmatic oesophageal hiatus and extending to the GEJ (Figure 2A).

The patient underwent conservative management (nothing per os, parenteral nutrition, H2 receptor antagonists, antibiotics). Her clinical condition gradually improved. She started oral diet on day 8 and discharged home one week later. A repeat CT scan two months later showed complete resolution of the hematoma (Figure 2B).

Intramural hematoma of the esophagus (IHE) is rare, and patients typically present with chest pain that is difficult to distinguish from other cardiac or thoracic emergencies. Therefore, it is very important for clinicians to be aware of this condition and avoid misdiagnosis¹.

References

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Keywords: esophagus, hematoma

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Figure 2: A) Asymmetric mural thickening (arrows) of the esophagus. B) Complete resolution of the hematoma.

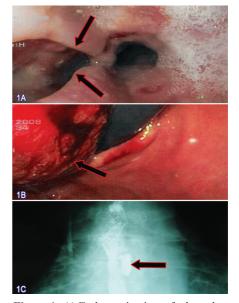


Figure 1: A) Endoscopic view of a large hematoma (arrow) B) False esophageal lumen (arrow). C) Esophagogram revealed contrast material (arrow) inside the wall.



Prevalence and sociodemographic correlates of addictive substances use among medical school students

Dear Editor,

We present our study, which aimed at estimating the prevalence of use of addictive substances in a sample of students of Medical school of Aristotle University of Thessaloniki and to assess correlations between substance abuse and the sociodemographic characteristics of this target group.

This descriptive study was conducted in students of first to fifth year of the Medical school (n: 410, males: 185, females: 225, mean age: 20.9 years), using a voluntary, anonymous, self-administered questionnaire. The questions were

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