

NO NEED FOR THAT SINKING FEELING?

TEODROS TRUNEH, MAX WHITTAKER, EMEKA SAMPSON, DARREN BOONE

UNIVERSITY COLLEGE LONDON HOSPITALS NHS FOUNDATION TRUST



University College
London Hospitals
NHS Foundation Trust



BSGAR
British Society of Gastrointestinal & Abdominal Radiology

CASE PRESENTATION

- A 27 YEAR OLD FEMALE PRESENTED WITH A 1 YEAR HISTORY OF WEIGHT LOSS AND DYSPHAGIA TO LIQUIDS
- SHE HAD A PAST MEDICAL HISTORY OF REFLUX SYMPTOMS

INVESTIGATIONS

- OGD DEMONSTRATED A FLUID FILLED, DILATED OESOPHAGUS
- MANOMETRY DEMONSTRATED A HYPERTENSIVE LOWER OESOPHAGEAL SPHINCTER THAT FAILED TO RELAX
- A TIMED BARIUM STUDY WAS PERFORMED AND DEMONSTRATED PROLONGED HOLD UP OF LIQUID AND SOLID BOLUSES

FLUOROSCOPY

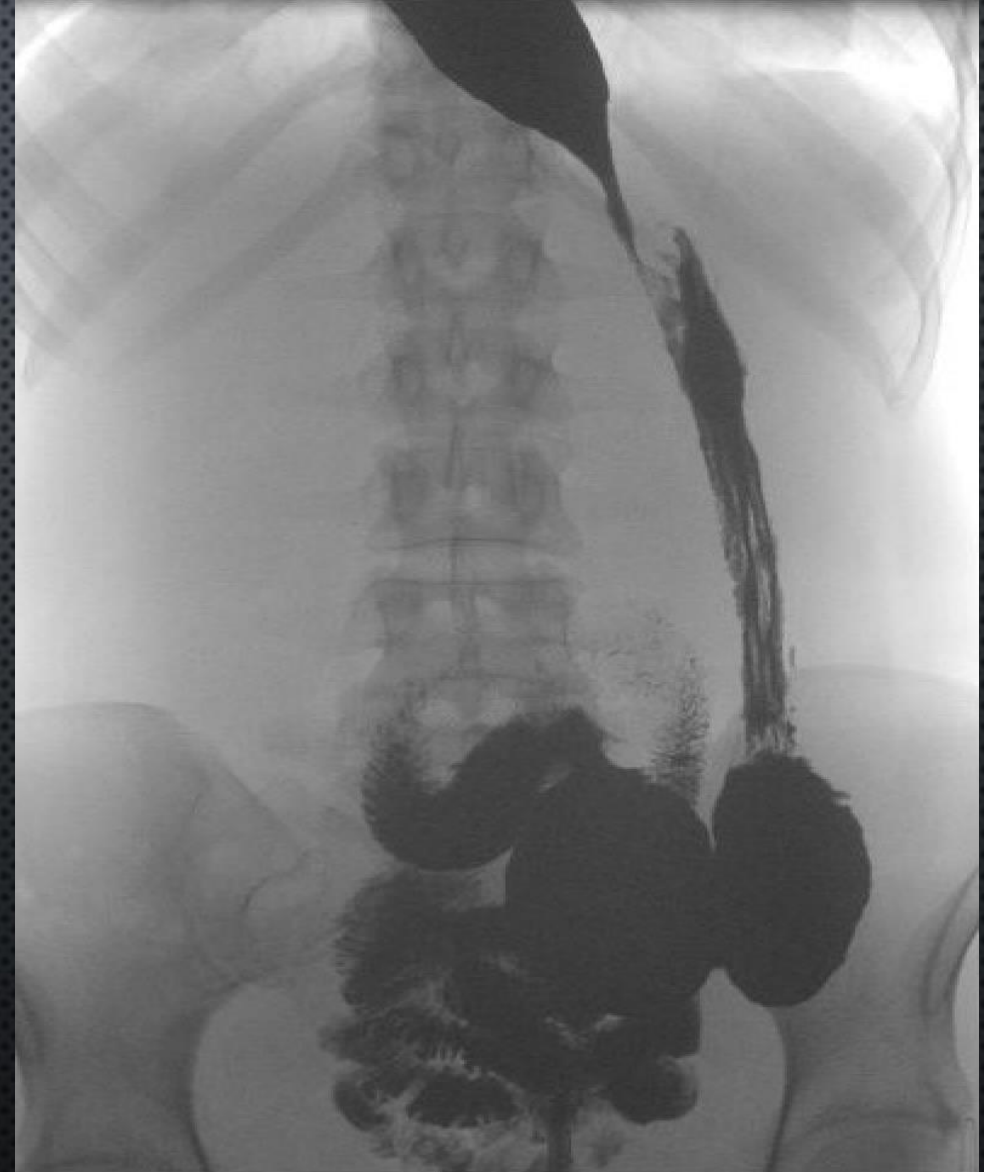


5 MINUTES AFTER INGESTION OF
200ML LIQUID BARIUM SULPHATE

DELAYED OESOPHAGEAL
EMPTYING IS SEEN, WITH THE
CHARACTERISTIC 'RAT'S TAIL'
APPEARANCE OF THE LOWER
OESOPHAGEAL SPHINCTER AS SEEN
IN ACHALASIA

THE STOMACH IS ELONGATED WITH THE
GREATER CURVATURE SEEN EXTENDING
BELOW THE LEVEL OF THE ILIAC
CRESTS, SUPPORTING A DIAGNOSIS OF
GASTROPTOSIS

THE DUODENUM CROSSES THE MIDLINE
AT L5 AND ALL THE IMAGED JEJUNAL
LOOPS ARE SEEN WITHIN THE PELVIS, IN
KEEPING WITH ENTEROPTOSIS



GASTROPTOSIS

- ABNORMAL DOWNWARDS DISPLACEMENT OF THE STOMACH
- DIAGNOSIS IS MADE ON FLUOROSCOPY IN THE STANDING POSITION
- THE GREATER CURVATURE PROJECTS BELOW THE ILIAC CRESTS, WITH THE CARDIA IN ITS NORMAL POSITION
- ASSOCIATED WITH DELAYED GASTRIC EMPTYING, EPIGASTRIC PAIN, EARLY SATIETY, AND REFLUX SYMPTOMS



ENTEROPTOSIS

- ABNORMAL DOWNWARDS DISPLACEMENT OF THE BOWEL
- ASSOCIATED WITH GI SYMPTOMS INCLUDING ABDOMINAL DISTENSION AND POST-PRANDIAL DISCOMFORT
- OTHER SIMILAR VISCEROPTOSSES ARE DESCRIBED INVOLVING THE COLON (*COLOPTOSIS*), LIVER (*HEPATOPTOSIS*) AND KIDNEYS (*NEPHROPTOSIS*)

AL-TUBAIKH, J.A. (2023). AUTONOMIC MEDICINE. IN: INTERNAL MEDICINE. SPRINGER, CHAM.

MANAGEMENT

- THE PATIENT UNDERWENT *RIGIFLEX* BALLOON DILATATION
- GOOD OUTCOME ON REPEAT TIMED BARIUM STUDY- THERE WAS NO HOLD UP OF LIQUID BOLUSES

DISCUSSION

- AN UNUSUAL CASE
- TO OUR KNOWLEDGE, THERE ARE NO PUBLISHED CASES OF ACHALASIA WITH CONCURRENT GASTROPTOSIS/ENTEROPTOSIS
- THE DIAGNOSES OF GASTROPTOSIS AND ENTEROPTOSIS REMAIN OF UNCERTAIN CLINICAL SIGNIFICANCE, BOTH IN THIS CASE AND IN THE WIDER LITERATURE [1]