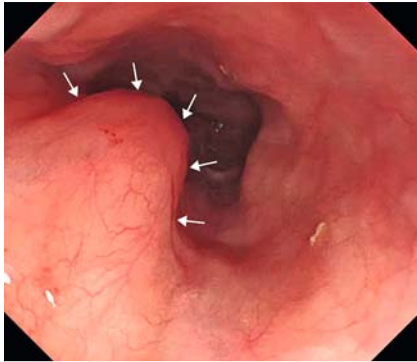
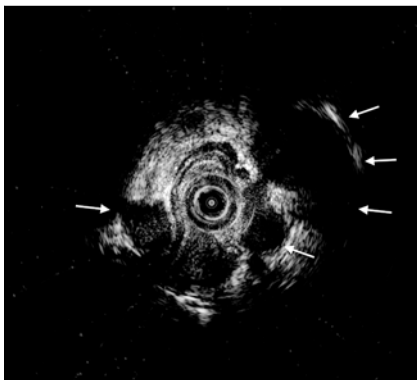


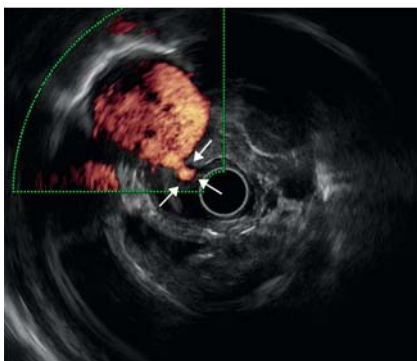
Abnormal bronchial artery mimicking esophageal submucosal tumor

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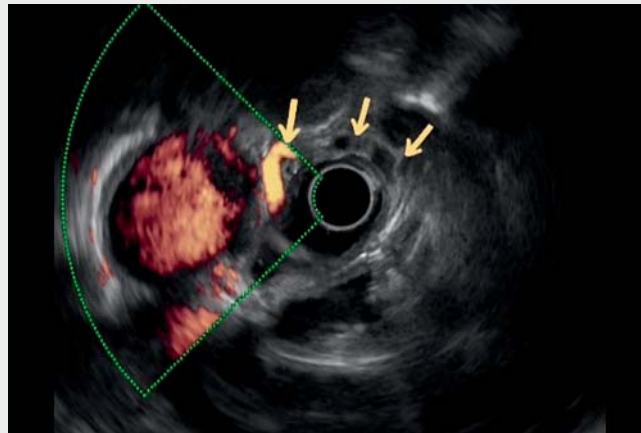
► **Fig. 1** A subepithelial lesion (arrows) in the middle esophagus.



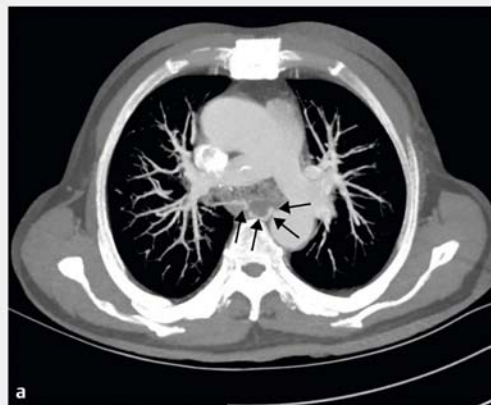
► **Fig. 2** Endoscopic ultrasonography with a miniprobe revealed a soft lesion without motion. The esophageal wall was normal, with anechoic tubular structure (arrows) outside the wall.



► **Fig. 3** Doppler sonography suggested an abnormal artery communicating (white arrows) with the aorta.



► **Video 1** Endoscopic ultrasonography with a miniprobe revealed a soft lesion without motion. The esophageal wall was normal, with anechoic tubular structure outside the wall. Doppler sonography suggested an abnormal artery communicating with the aorta.



► **Fig. 4** Enhanced computed tomography imaging. **a, b** Imaging confirmed the tortuous and dilated bronchial artery, which was causing esophageal compression.

An 80-year-old man presented with a subepithelial lesion in the middle esophagus (► **Fig. 1**). He reported no significant discomfort. His medical history was unremarkable. Physical examination revealed no significant abnormalities. Endoscopic ultrasonography (EUS) with a miniprobe revealed a soft lesion without motion. The esophageal wall was normal, with anechoic tubular structure outside

the wall (► **Fig. 2**). Doppler sonography suggested an abnormal artery communicating with the aorta (► **Fig. 3**, ► **Video 1**). Enhanced computed tomography (CT) confirmed the tortuous and dilated bronchial artery, which was causing esophageal compression (► **Fig. 4**). Thus, the patient was diagnosed with abnormal bronchial artery mimicking esophageal submucosal tumor. As the

patient reported no dysphagia or other symptoms, regular follow-up was prescribed [1]. The patient remained well during 6 months of follow-up.

Esophageal submucosal tumors are commonly encountered during clinical practice. Hemangioma, leiomyoma, granular cell tumor, and cyst are common types [2]. In this case, we reported a rare condition of abnormal bronchial artery mimicking esophageal submucosal tumor. Our experience further demonstrates the importance of routine application of Doppler sonography or enhanced CT for determining the nature of submucosal tumors.

Endoscopy_UCTN_Code_CCL_1AB_2AC_3AH

Acknowledgments

We acknowledge the support from Natural Science Foundation of China (Grant No: 82170675), 1-3-5 project for disciplines of excellence, West China Hospital, Sichuan University (Grant No: ZYJC21011), and Science and Technology Bureau of Ya'an City 22KJJH0019.

Funding

Science and Technology Bureau of Ya'an City
22KJJH0019

1-3-5 project for disciplines of excellence, West China Hospital, Sichuan University
ZYJC21011

National Natural Science Foundation of China
82170675

Competing interests

The authors declare that they have no conflict of interest.

The authors

Ou Chen^{1,2*}, Liansong Ye^{1*}, Li Zhang³, Bing Hu¹

- 1 Department of Gastroenterology, West China Hospital, Sichuan University, Chengdu, China
- 2 Department of Gastroenterology, Ya'an People's Hospital, Ya'an, China
- 3 Department of Radiology, Ya'an People's Hospital, Ya'an, China

Corresponding author

Bing Hu, MD

Department of Gastroenterology, West China Hospital, Sichuan University, 37 Guo Xue Alley, Wuhou district, Chengdu City, Sichuan Province 610041, China
hubingnj@163.com

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Endoscopy 2023; 55: E462–E463

DOI 10.1055/a-2018-4127

ISSN 0013-726X

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* Co-first authors.