

## Epiphrenic Esophageal Diverticulum

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A 53-year-old woman presented with intermittent dysphagia to solids and postprandial cough for 2 years. Physical examination was unremarkable. A chest radiograph disclosed a round density with an air-fluid level in the mediastinum (Fig. 1). A barium swallow examination revealed an epiphrenic esophageal diverticulum, and delayed emptying with lower esophageal dilatation (Fig. 2). Upper endoscopy confirmed the presence of the diverticulum. She chose to undergo conservative treatments with dietary and postural advice, showing improvement of the symptoms.

Epiphrenic esophageal diverticulum is a rare disease, which is usually located within 10 cm of the gastroesophageal junction. Etiologies include underlying oesophageal motility disorders which may increase in intraluminal pressure.<sup>1</sup> Larger diverticulum with concomitant motility disorders may cause dysphagia, regurgitation, chest pain, asthma, and aspiration pneumonia. Differential

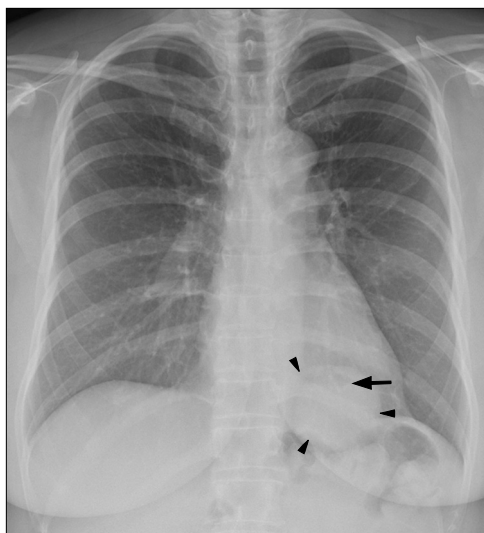
diagnosis includes hiatal hernia and esophageal tumors, which can be evaluated by the barium swallow and endoscopy. Diverticulectomy and myotomy can be indicated for refractory symptoms.<sup>2</sup>

### CONFLICT OF INTEREST STATEMENT

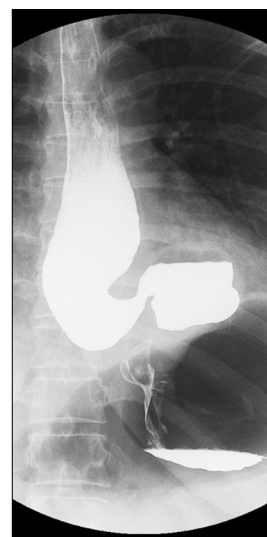
None declared.

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**FIG. 1.** A chest radiograph disclosed a round density (arrowheads) with an air-fluid level (arrow) in the mediastinum.



**FIG. 2.** A barium swallow examination revealed an epiphrenic esophageal diverticulum with a diameter of 8 cm, and delayed emptying with lower esophageal dilatation.

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