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【 PICTURES IN CLINICAL MEDICINE 】

Extended Esophageal Achalasia

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Key words: esophageal achalasia, peroral endoscopic myotomy

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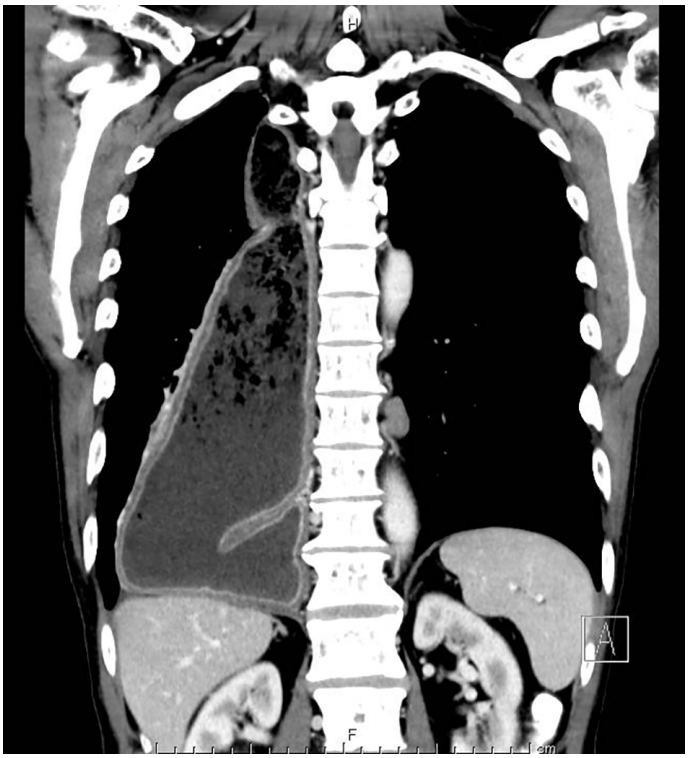

Picture 1.

A 62-year-old man with a 20-year history of dietary disturbance had been diagnosed with esophageal achalasia 5 years ago but left untreated. His Eckardt score was 5 when he visited our hospital for treatment. His abdomen appeared distended and soft. Computed tomography revealed a markedly dilated esophagus in the thoracic cavity with a large amount of residue (Picture 1). He was examined with upper gastrointestinal endoscopy, esophageal radiography, and high-resolution manometery (1) to obtain a diagnosis. Subsequently, he was treated with peroral endoscopic myotomy (POEM) (Picture 2). Three days after the treatment, his symptoms improved (Eckardt score 0). Esophageal achalasia is an esophageal motility disorder characterized by an impaired relaxation of the lower esophageal sphincter. When performing POEM with an expanded esophagus, it is difficult to determine the scope position in the submucosal tunnel. The POEM guidelines suggest that POEM is effective even in sigmoid-type achalasia, but it should be performed by an experienced surgeon (2).

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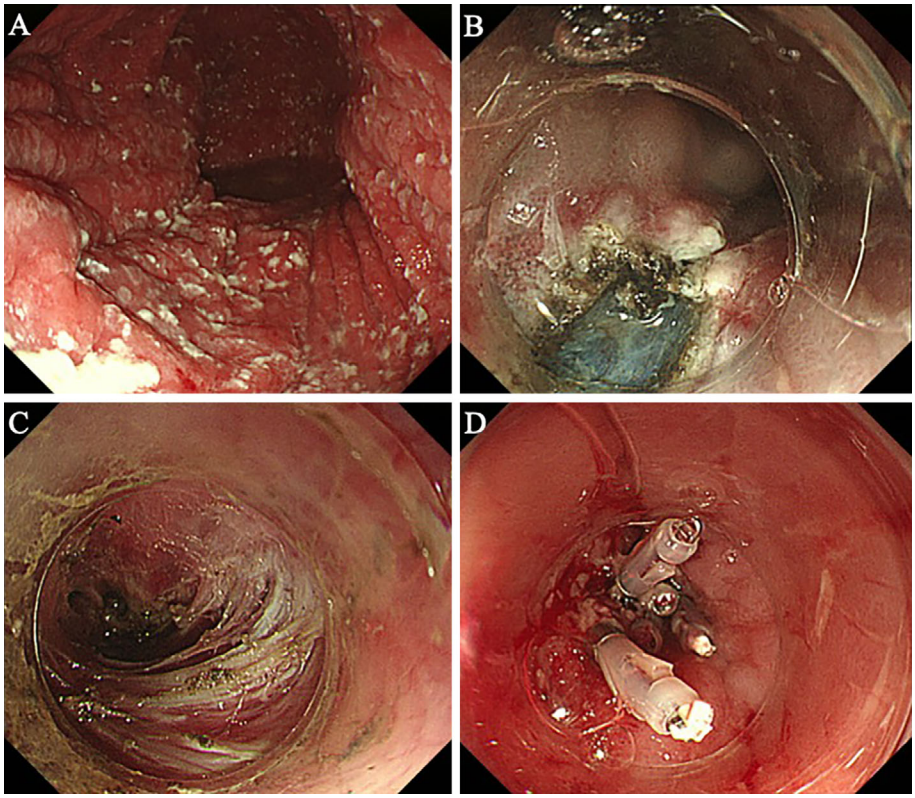

Picture 2.

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