

Clinical Image

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Esophageal stricture: A cascade of complications**Beatriz Chambino***

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Clinical image description

A 90-year old male diagnosed with stage III non-Hodgkin's peripheral T-cell lymphoma under palliative treatment was admitted due to a feeling of food impaction and vomiting. He underwent upper digestive endoscopy which revealed an extensively necrotic esophageal mucosa with complete esophagus obstruction where two impacted pills were seen (Figure 1) and fragmented. Non-contrast chest computed tomography showed multiple exuberant mediastinal adenopathies conditioning extrinsic compression and esophageal collapse (Figure 2). Patient later underwent endoscopic reassessment which showed complete mucosa healing, therefore proceeding with esophageal stenosis endoluminal balloon dilation. Mediastinal adenopathies due to peripheral T cell-lymphoma are rare. This case represents an unusual example of extrinsic esophageal compression due to lymphoma leading to severe pill-induced esophagitis.

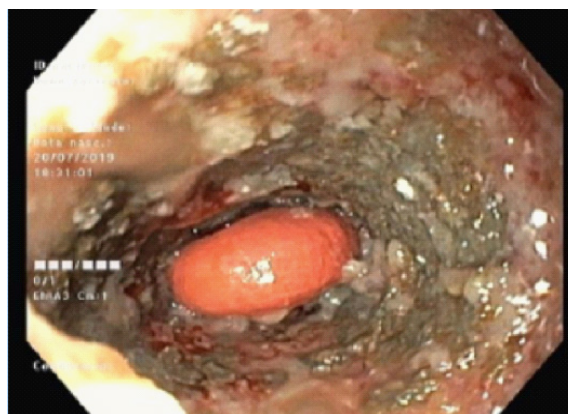


Figure 1: Upper digestive endoscopy revealing extensive pill-induced esophagitis.

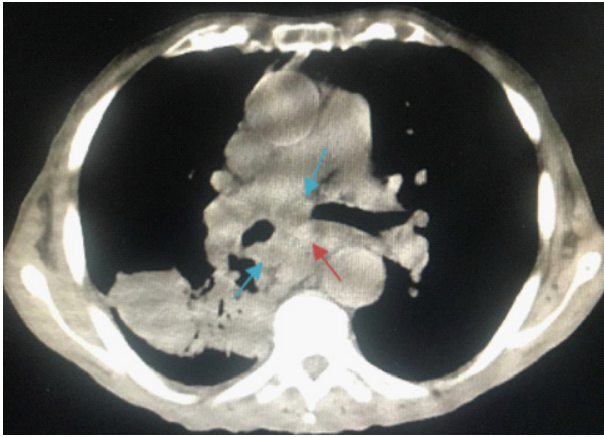


Figure 2: chest computed tomography showing esophageal stenosis (red arrow) due to extrinsic compression caused by exuberant mediastinal adenopathies (blue arrows).