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A gastric diverticulum presenting as massive intra-diverticular bleeding

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Statement of the Problem: Gastric diverticula (GD) are rare and frequently asymptomatic. However, there are cases that present with massive upper gastrointestinal bleeding (UGIB). A search by Gibbons *et al.*, revealed only five cases that have shown that intraluminal hemorrhage originated within the diverticulum. We report a 69-year-old female who presented at the emergency room (ER) with massive hematemesis. She had a three-month history of heartburn, epigastric discomfort and vomiting. She eventually developed acute respiratory failure secondary to hypovolemic shock from UGIB. She was conscious and generally pale, with anicteric sclera and pale conjunctivae. Abdominal examination showed a midline infra-umbilical scar, but was otherwise unremarkable.

Diagnostic Work-up: Upper Gastrointestinal Endoscopy (UGIE) revealed pooling of coffee ground mixed with fresh blood and food materials in a diverticulum that seemed to be below the gastro-esophageal junction. Bleeding ulcers at the middle to distal third of the esophagus were also noted. To establish diagnosis, location of the diverticulum and possible surgical intervention, a barium meal was requested that revealed a proximal gastric diverticulum. Narrow Band Imaging (NBI) also showed a gastric mucosa lining the diverticulum.

Treatment: The patient was offered definitive treatment through laparoscopic resection but was not amenable during the present admission. Management included a long-term proton pump inhibitor and diet that involved small frequent feedings.

Conclusion & Significance: Although most GD is asymptomatic, our patient presented with massive UGIB. To our knowledge, this is the first reported case in the Philippines of GD presenting as hematemesis secondary to intra-diverticular hemorrhage, confirmed with barium swallow and NBI.

Recommendations: A high index of suspicion is required to diagnose GD because it can lead to life threatening complications such as massive UGIB and because definitive treatment is available and complete cure is attainable.

Recent Publications

1. Podda M, Atzeni J, Campanella A M, Saba A and Pisanu A (2016) Syncope with surprise: an unexpected finding of huge gastric diverticulum. Hindawi Publishing Corporation. 2016: 1941293.
2. Rashid F, Aber A and Iftikhar S (2017) A review on gastric diverticulum. World Journal of Emergency Surgery. 7:1.
3. Hernandez G H, Soto I C F and Garcia C A J (2016) Gastric diverticulum: a rare endoscopic finding. Journal of Hepatology and Gastrointestinal Disorders. 2:2.
4. Kumar P and Chandra K (2014) A case of gastric diverticulum: solitary fundal diverticulum. Indian Journal of Clinical Practice. 25:4.
5. Feng Y and Zhang Z (2015) Gastric diverticulum stimulating a left adrenal mass: a case report and review of related literature. Oncology Letters. 10:2477-2480.

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