

Pneumatosis Cystoides Intestinalis: An Unexpected Cause of Duodenal Nodules

Pneumatose Cistóide Intestinal: Uma Causa Inesperada de Nódulos Duodenais



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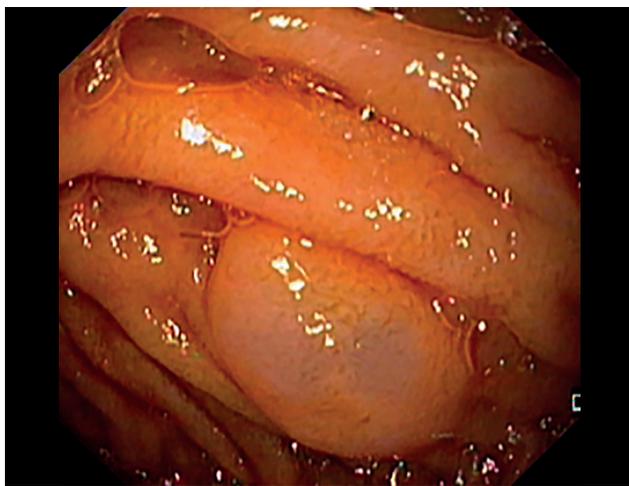


Figure 1 – Upper endoscopy revealing a nodule in the second part of the duodenum. A bluish mucosa suggests presence of air inside.

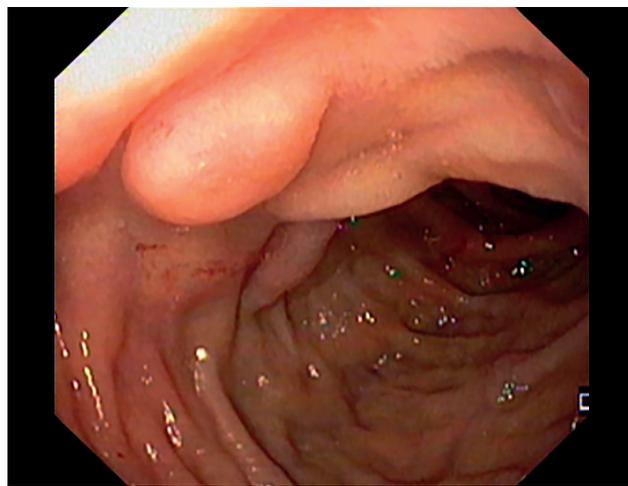


Figure 2 – Upper endoscopy showing a nodule in the duodenal bulb

A 30-year-old woman was referred for upper endoscopy due to epigastric pain for one year. She had a history of a perforated duodenal ulcer that was sutured after laparotomy two years before. Upper endoscopy revealed three nodular lesions in the duodenum (Fig.s 1 and 2). Mucosa overlying the nodules had a bluish hue, highly suggestive of presence of air inside. After puncture with biopsy snare we verified air release and collapsing of the lesions, confirming the diagnosis of pneumatosis cystoides intestinalis.

Pneumatosis cystoides intestinalis refers to the presence of gas in the wall of the intestine, being associated with numerous conditions, ranging from benign to life threatening.¹ Even though there are published cases with radiographic evidence of duodenal pneumatosis,² endoscopic reports are anecdotal. Although pneumatosis cystoides intestinalis can be seen on abdominal radiographs, computed tomography is the most sensitive imaging test

for identification and diagnosis of potential life-threatening causes of this condition.³ A computed tomography was performed after upper endoscopy and excluded an acute intra-abdominal emergency. Our patient was referred for a conservative approach, with clinical surveillance and started a proton-pump inhibitor for symptomatic control. One year after the procedure the patient is asymptomatic. Upper endoscopy was repeated and revealed no lesions. If the patient remains symptomatic or if some complication arises surgery can be considered.⁴

DATA CONFIDENTIALITY

Informed consent was duly obtained from the patient.

CONFLICTS OF INTEREST

All authors report no conflict of interest.

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