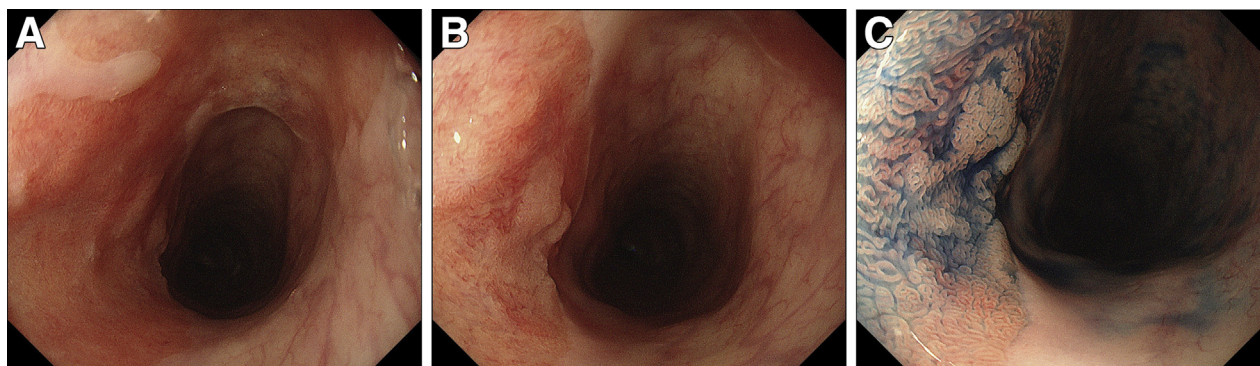


## An Unlikely Lesion to Be Identified in the Cervical Esophagus



Kyosuke Tanaka,<sup>1</sup> Masaya Fujiwara,<sup>2</sup> and Hideki Toyoda<sup>3</sup>

<sup>1</sup>Department of Endoscopy, <sup>2</sup>Department of Pathology, Mie University Hospital, Tsu, and <sup>3</sup>Happy GI Clinic, Kameyama, Japan



**Question:** A 69-year-old woman with a history of acute hepatitis A underwent esophagogastroduodenoscopy during an annual health check-up. The patient had no abdominal symptoms and laboratory test results were unremarkable. Esophagogastroduodenoscopy showed a slightly reddish mucosa in the cervical esophagus (two-thirds of the circumference; [Figure A](#)). A flat elevated lesion of irregular shape was identified in the distal side of the slightly reddish mucosa ([Figure B](#)). Chromoendoscopy with indigo carmine demonstrated a clear demarcation line around the circumference of the lesion ([Figure C](#)).

What is the diagnosis?

Look on page 611 for the answer and see the *Gastroenterology* web site ([www.gastrojournal.org](http://www.gastrojournal.org)) for more information on submitting your favorite image to Clinical Challenges and Images in GI.

### Conflicts of interest

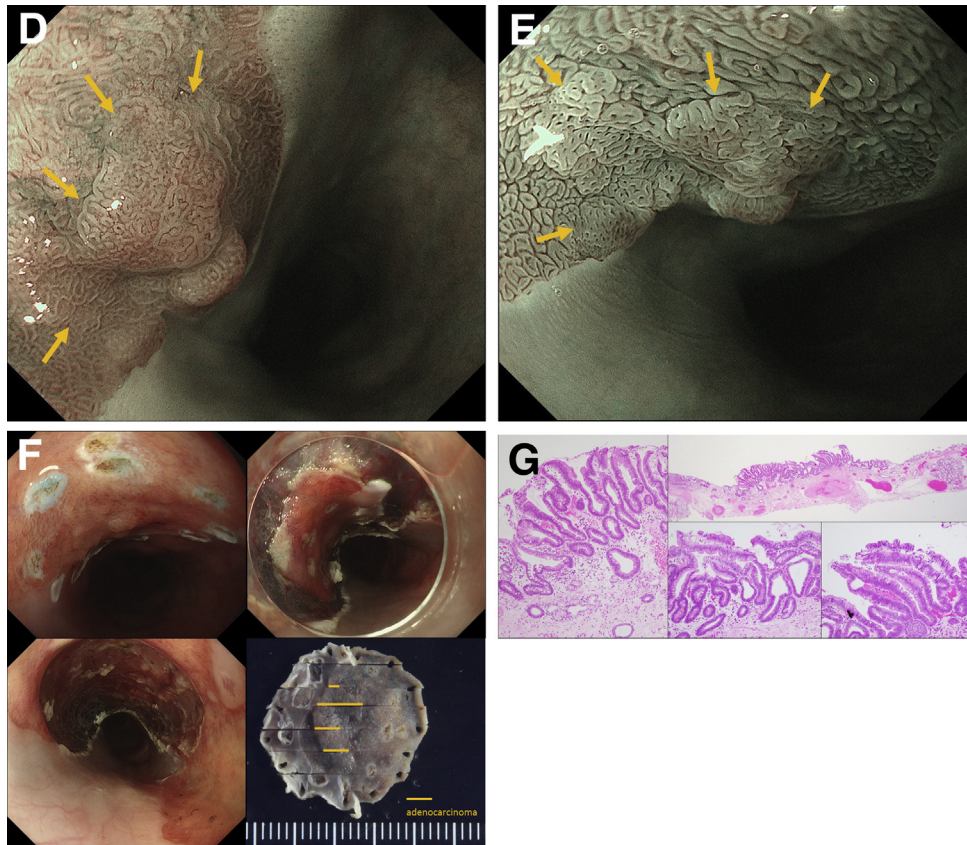
The authors disclose no conflicts.

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## Answer to: Image 1 (Page 610): Adenocarcinoma Arising From Heterotopic Gastric Mucosa in the Cervical Esophagus



Magnifying endoscopy with narrow band imaging (NBI-ME) showed an irregular vascular pattern and an irregular microstructural pattern on the lesion (Figure D, arrows). NBI-ME with spraying of 1.5% acetic acid clearly demonstrated an irregular microstructural pattern (Figure E, arrows). During the esophagogastroduodenoscopy, biopsies were also performed on the lesion. Pathologically, these specimens showed atypical glands. Based on NBI-ME and pathologic findings, the presence of an adenoma or adenocarcinoma was suspected. Endoscopic submucosal dissection was performed owing to the malignant potential of the lesion (Figure F). The lesion (approximately 10 mm in diameter) was completely removed en bloc without complications. Pathologic examination showed atypical glandular and papillary structures with enlarged hyperchromatic nuclei, in the normal heterotopic gastric mucosa and squamous epithelium (Figure G). A histopathologic diagnosis of intramucosal well-differentiated tubular adenocarcinoma arising from heterotopic gastric mucosa in the cervical esophagus was finally established.

Esophageal adenocarcinomas arising from heterotopic gastric mucosa are extremely rare.<sup>1</sup> Thus far, only 10 of >60 cases of adenocarcinoma arising from heterotopic gastric mucosa described in the literature have been treated endoscopically.<sup>2,3</sup> In this case, owing to the subtle morphologic change, the lesion was unlikely to be identified by conventional endoscopic view. Such irregular microvascular and irregular microsurface patterns could become an endoscopic hallmark of cervical esophageal adenocarcinoma, similar to early gastric cancers. This case shows that careful observation using magnifying endoscopy may be helpful for the detection and diagnosis of adenocarcinoma in cervical esophageal heterotopic gastric mucosa.

### Supplementary Material

Note: To access the supplementary material accompanying this article, visit the online version of *Gastroenterology* at [www.gastrojournal.org](http://www.gastrojournal.org), and at <https://doi.org/10.1053/j.gastro.2018.01.050>.

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