An endoscopic examination revealed dissecting intramural hematoma of the esophagus (DIHE). The DIHE, which responded to conservative therapy, appeared to be healing by 2 weeks after admission.

Key words: dissecting intramural hematoma of the esophagus (DIHE), aspirin, Kendo

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A 69-year-old man who was under treatment with low-dose aspirin as an anti-thrombotic agent, was admitted to our hospital with a history of progressive dysphagia, pain while swallowing, and repetitive vomiting. He had played Kendo for a week before the onset of the symptoms. Upper gastrointestinal endoscopic examination revealed a massive red-colored submucosal hematoma in the lower esophagus (13 cm in diameter: Picture 1), based on which we made a diagnosis of dissecting intramural hematoma of the esophagus (DIHE). The DIHE, which responded to conservative therapy, appeared to be healing by 2 weeks after admission (Picture 2).

DIHE is a rare condition in which intramural hemorrhage leads to submucosal dissection of the esophageal wall. It usually occurs in the lower esophagus, and is caused by a rapid increase in intraesophageal pressure, trauma or a coagulation disorder (1, 2). In some cases, heavy sports, eating and vomiting can lead to this condition. DIHE usually runs a benign course and has an excellent prognosis when managed conservatively. The present patient played Kendo, which means “the way of the sword”, the art of traditional Japanese fencing originally practiced by the Samurai, while under treatment with low-dose aspirin.

In conclusion, DIHE is a rare but clinically important condition in patients taking an anticoagulant and playing strenuous sports such as Kendo.

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