A Rare Cause of Hepatic Portal Venous Gas with Gastric Emphysema

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A 46-year-old man with history of squamous cell carcinoma of the esophagus with distant metastasis presented with a 2-day history of progressive coffee ground emesis and generalized upper abdominal discomfort. A physical examination showed tender epigastrium without peritonism and hypoactive bowel sounds. Computed tomography of the abdomen demonstrated hepatic portal venous gas (HPVG) (Picture 1). An additional finding of layers of bubbles in the superior gastric wall, was suggestive of gastric emphysema (Picture 2). The patient rapidly progressed to a state of septic shock and died, in spite of medical treatment, within 24 hours. HPVG is an ominous image finding associated with intra-abdominal disease. Its association with a poor prognosis and a high rate of mortality (39%) almost necessitate emergent laparotomy (1). The possible etiologies include bowel infarction, necrotizing enterocolitis, closed loop obstructions, acute hemorrhagic pancreatitis, granulomatous enterovenous fistula, pseudomembranous colitis, gastric ulcer and gastric emphysema (2).

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References