A 65-year-old man was admitted to our hospital after being injured in a motor vehicle accident. Fractures of the sternum and right tibia were diagnosed and surgical bone repair was planned. Preoperative transthoracic echocardiography (TTE) revealed an unusual round-shaped mass with a central high echoic lesion, measuring 2-3 cm in diameter, behind the left atrium (Picture 1). Contrast-enhanced CT revealed a marked dilatation of the lower esophagus; a thickened and partially disrupted wall and surrounding fluid collection (Picture 2). Thus, traumatic esophageal injury with mediastinitis was diagnosed and conservatively treated. The patient successfully recovered without any complications.

Esophageal injury is a rare, but serious complication after a traffic accident, and an early diagnosis and treatment are required (1). This is the first reported case of traumatic esophageal injury which was diagnosed by preoperative TTE (2). If a dilatation of the esophagus is detected by TTE in patients after a traffic accident, then contrast-enhanced CT is necessary in order to make a definite diagnosis of esophageal injury.

The authors state that they have no Conflict of Interest (COI).

1Division of Internal Medicine, Saiseikai Kanazawa Hospital, Japan and 2Department of Cardiovascular and Internal Medicine, Kanazawa University Graduate School of Medicine, Japan
Received: May 13, 2017; Accepted: June 1, 2017; Advance Publication by J-STAGE: November 1, 2017
Correspondence to Dr. Kotaro Oe, kotaroce316@yahoo.co.jp
References


The Internal Medicine is an Open Access article distributed under the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License. To view the details of this license, please visit (https://creativecommons.org/licenses/by-nc-nd/4.0/).