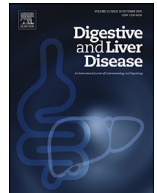




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## Digestive and Liver Disease

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## Image of the Month

## A case of mediastinal pancreatic pseudocysts mimicking esophageal varices with successful endoscopic drainage

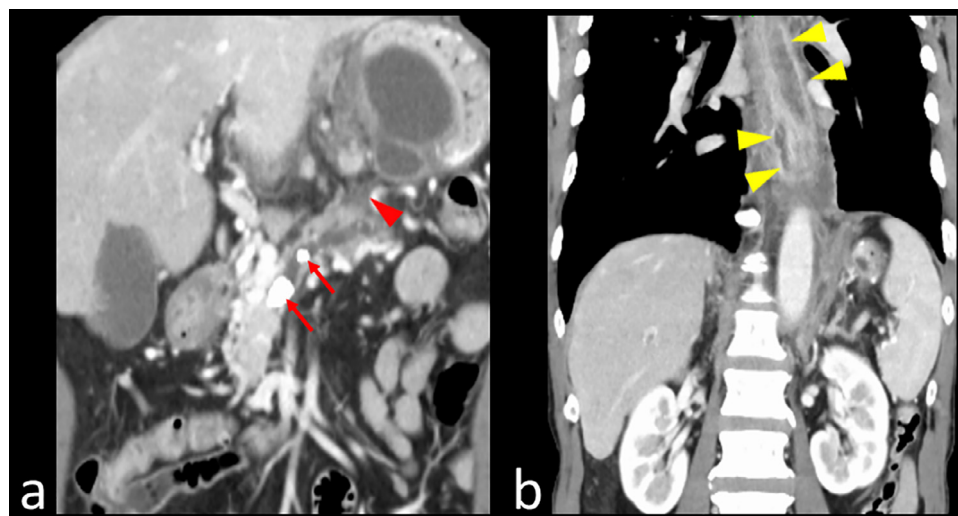
Noriko Inomata, Arata Sakai\*, Shohei Abe, Yuzo Kodama

Division of Gastroenterology, Department of Internal Medicine, Kobe University Graduate School of Medicine, Japan

Mediastinal pancreatic pseudocysts (PPCs) caused by pancreatic duct leaks are rare complications of chronic pancreatitis [1]. In such cases, immediately resolving the leak before an esophageal fistula develops is important [2]. Here, we report a case in which mediastinal PPCs were successfully treated with endoscopic nasal pancreatic drainage (ENPD).

A 66-year-old male was referred to our hospital with abdominal pain caused by chronic alcoholic pancreatitis. Contrast-enhanced CT revealed pancreatic stones in the pancreatic body (Fig. a, red arrow) and a pancreatic duct leak on the distal side of the stones (Fig. a, red arrowhead). Mediastinal PPCs, extending from the pancreatic duct through the esophageal hiatus, were also observed (Fig. b, yellow arrowhead) (Figs. 1 and 2).

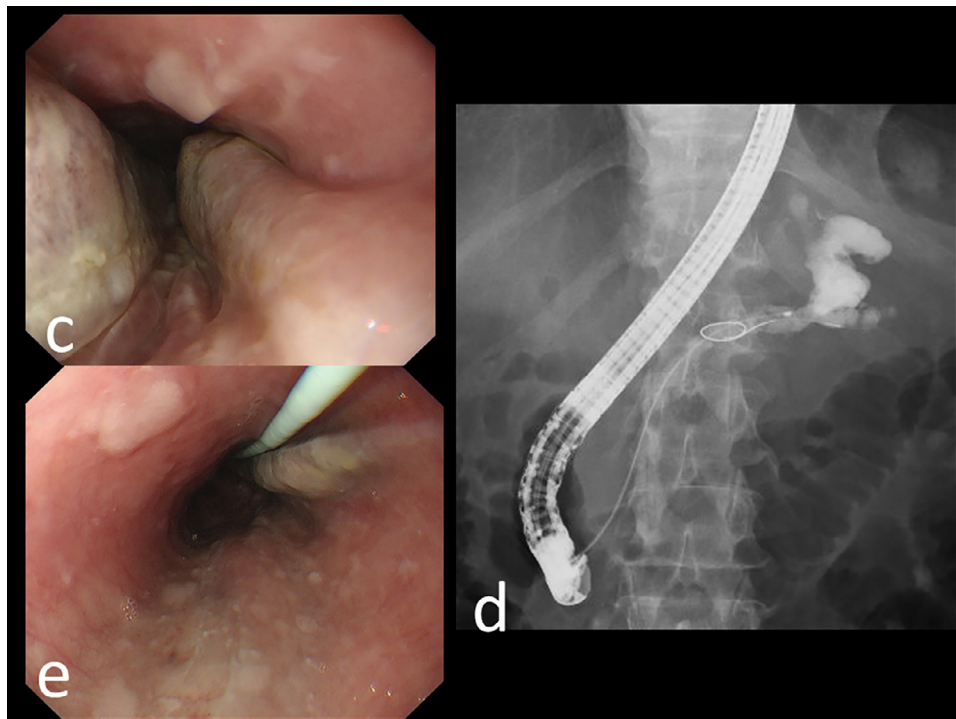
Upper gastrointestinal endoscopy (UGE) revealed multiple sub-mucosal bulging areas mimicking esophageal varices. They were caused by mediastinal PPCs, extending into the esophageal wall (Fig. c). Endoscopic retrograde pancreatography showed a pancreatic duct leak (Fig. d), and a 5Fr ENPD tube was inserted to bridge it. Follow up CT showed immediate resolution of the PPCs, and UGE revealed that the esophageal submucosal bulging areas had also resolved (Fig. e). Afterwards, the pancreatic stones were completely removed by extracorporeal shockwave lithotripsy with subsequent endoscopic stone extraction. The patient's post-treatment course was uneventful.



**Fig. 1.** A contrast-enhanced CT scan revealed pancreatic stones in the pancreatic body (a. red arrow) and a pancreatic duct leak on the distal side of the stones (a. red arrowhead). Mediastinal pancreatic pseudocysts were extending from the pancreatic duct through the esophageal hiatus (b. yellow arrowhead).

\* Corresponding author.

E-mail address: [asakai@med.kobe-u.ac.jp](mailto:asakai@med.kobe-u.ac.jp) (A. Sakai).



**Fig. 2.** Upper gastrointestinal endoscopy (UGE) revealed multiple submucosal bulging areas mimicking esophageal varices (Fig. c). Endoscopic retrograde pancreatography showed a pancreatic duct leak (Fig. d). UGE revealed that the esophageal submucosal bulging areas had also resolved (Fig. e).

### Conflict of Interest

The authors have no conflicts of interest to disclose concerning this article.

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### Informed consent

Informed consent was obtained from the patient for the publication of his information and imaging.

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