Mucosal bridge due to reflux esophagitis

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Introduction

Mucosal bridges have most often been observed in the colon, associated with inflammatory bowel disease. Though reflux esophagitis is a common disease that can easily cause a mucosal bridge, we report this case because of its rarity.

Case Report

A 28-year-old man had congenital dysphagia due to intracerebral neurofibroma. He visited our hospital complaining of heartburn and occasional coffee residue-like vomiting for half a year. Esophagoscopy revealed a mucosal bridge in the middle part of the esophagus (Figure 1). This lesion was destroyed spontaneously by deeper insertion of the endoscope. Moreover, esophagoscopy showed linear mucosal breaks between the middle and lower body of the esophagus (Figure 2). Therefore, he was diagnosed as having a mucosal bridge due to reflux esophagitis.

Discussion

A mucosal bridge in the esophagus is a rare condition that can be caused by congenital anomalies, mediastinal radiotherapy, esophageal variceal sclerotherapy, a nasoenteric feeding tube, and Crohn’s disease. Only one case with a mucosal bridge due to reflux esophagitis has been previously reported. An acquired mucosal bridge due to inflammatory processes may arise anywhere from the esophagus to the colon. The pathogenesis of mucosal bridge has been a subject of speculation. It was reported that mucosal bridge formation may be related to undermining of the mucosa by ulceration, followed by healing with re-epithelialization of the mucosal undersurface and formation of a mucosal tube attached at each end to the non-ulcerated wall. Alternatively, it may simply represent the attachment of the free ends of pseudopolyps to the adjacent mucosa. We presume that chronic, repetitive, esophageal ulceration and healing led to the formation of the mucosal bridge through these mechanisms.

References