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Esophageal compression by a mediastinal vascular structure as a result of a dysphagia lusoria

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Dear Editor,

We report the case of an 18-year-old female who was referred to our hospital due to the evaluation of progressive dysphagia to solids over a 5 month period. She denied weight loss or asthenia. A barium-swallow esophagram showed a proximal esophagus notch that was suggestive of an extrinsic compression (Fig. 1A). An upper endoscopy identified a protrusion at the back wall of the esophagus at 20 centimeters from the incisors. The diagnosis was confirmed by a contrast-enhanced computed tomography scan, which revealed a right subclavian artery that originated at the branch of the aortic arch (Fig. 1B). The patient had a favorable evolution following some advice about dietary modifications and swallowing strategies. She was referred and evaluated by cardiovascular Surgery and the intervention was deferred.

DISCUSSION

Dysphagia lusoria is a consequence of an extrinsic compression of the esophagus by vascular structures. The presence of an aberrant right subclavian artery is the most common associated anomaly described in the literature. This anatomic variant is due to an embryologic abnormality and was first described in 1735 by Hunauld (1). The

prevalence ranges from 0.5 to 1.8 % in the general population and 0.7 % in autopsy series (2).

Symptoms usually appear after the fifth decade of life and presentation at a young age (as in our patient case) or during childhood is uncommon, as described by Moreira et al. (3). The presence of respiratory symptoms is more common during this period. Treatment depends on the severity of the symptoms. A reconstructive vascular surgery may be necessary in severe cases due to the morbidity and mortality rates of up to 18 % (4).

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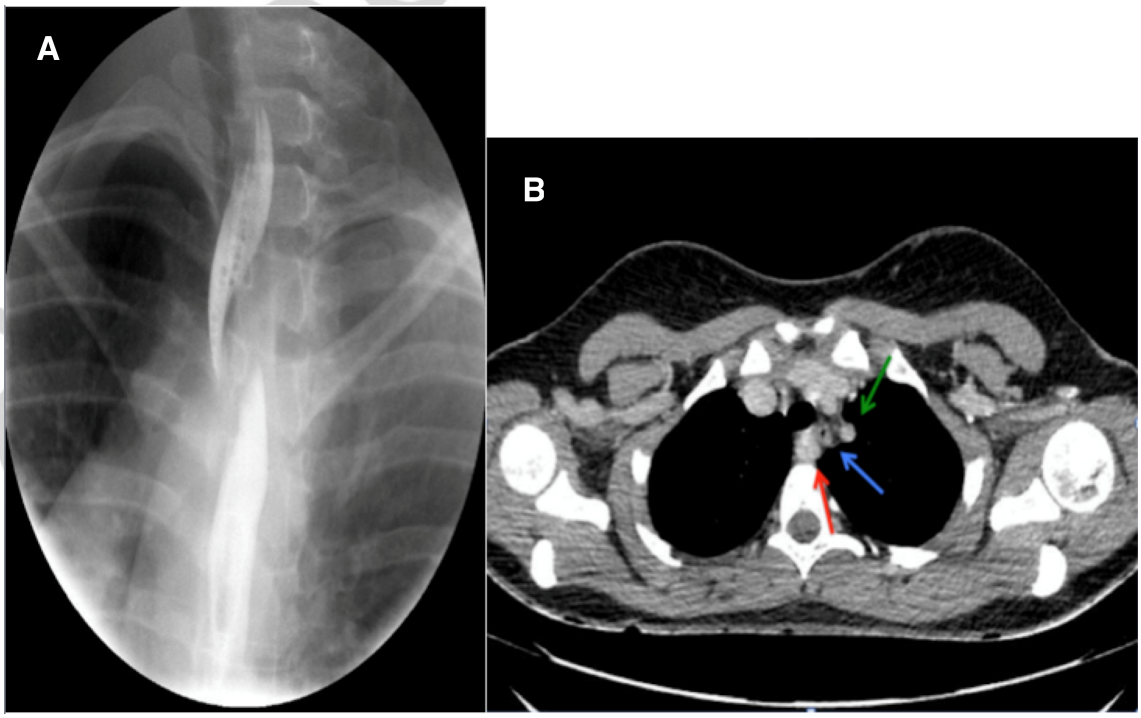

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Fig. 1. A. Esophagogram shows an ascending extrinsic protrusion from the left to right direction in the proximal third of the esophagus. **B**. Aberrant right subclavian artery (red arrow) located behind the esophagus (blue arrow), which displaces and compresses it. Subclavian left artery (green arrow).