

Title:

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DOI: 10.17235/reed.2023.9490/2023

Link: [PubMed \(Epub ahead of print\)](#)

Please cite this article as:

Parapar Álvarez Leire, Cerrella Cano Carolina , Vargas González Carlos Andrés, Armesto González Edisa M..
Endoscopic endoluminal therapy with the Eso-SPONGE® system as a treatment of spontaneous esophageal
perforation with associated paraesophageal collection. Rev Esp Enferm Dig 2023. doi: 10.17235/reed.2023.9490/2023.

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Endoscopic endoluminal therapy with the Eso-SPONGE® system as a treatment of spontaneous esophageal perforation with associated paraesophageal collection

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Keywords: Eso-SPONGE. Esophageal perforation. Endoscopy.

Dear Editor,

We present the case of a 92-year-old woman with no relevant history, who consulted for sore throat, progressive dysphagia to solids and fever. A cervical-thoraco-abdominal CT was performed with the finding of a paraesophageal collection at the level of C3-T1 without a clear solution of continuity, although with passage of oral contrast to the collection, exerting a mass effect on the esophageal lumen, suggestive of contained esophageal perforation, of cause not clarified (Fig. 1A).

A gastroscopy was performed, in which three esophageal fistulous orifices were observed, two 4-5 mm, and a third 10 mm deeper, located 22cm from the dental arch, septate, with perilesional purulent material and bubbling. (Fig. 1B). Methylene blue is introduced through the larger fistulous orifice under fiberoptic bronchoscopy control, ruling out fistulous communication with the airway. Subsequently, radiological control contrast is introduced, verifying filling of the elongated paraesophageal collection described in CT. The cavity is washed and the Eso-SPONGE® system is placed in the esophagus. Four replacements were performed every 3-4 days with practically complete closure of the lesions described, persisting a minimal esophageal pseudodiverticular mucosal defect and complete resolution of the paraesophageal collection on the control CT (Fig 1. C and D).

DISCUSSION

Esophageal endoluminal vacuum therapy with the Eso-SPONGE® system is an innovative, minimally invasive, effective and safe therapy, usually well tolerated, for the treatment of anastomotic leaks after spontaneous or iatrogenic esophageal resection or esophageal perforation. [1-3] It is therefore an alternative technique to the use of other therapeutic endoscopic procedures in esophageal fistulas, such as the use of Over-the-scope (OTSC®), covered esophageal metal stents, [4-5] with a high therapeutic success rate (80-100%). and a low rate of complications, which translates into a reduction in morbidity and mortality in this type of patient. [1-3]

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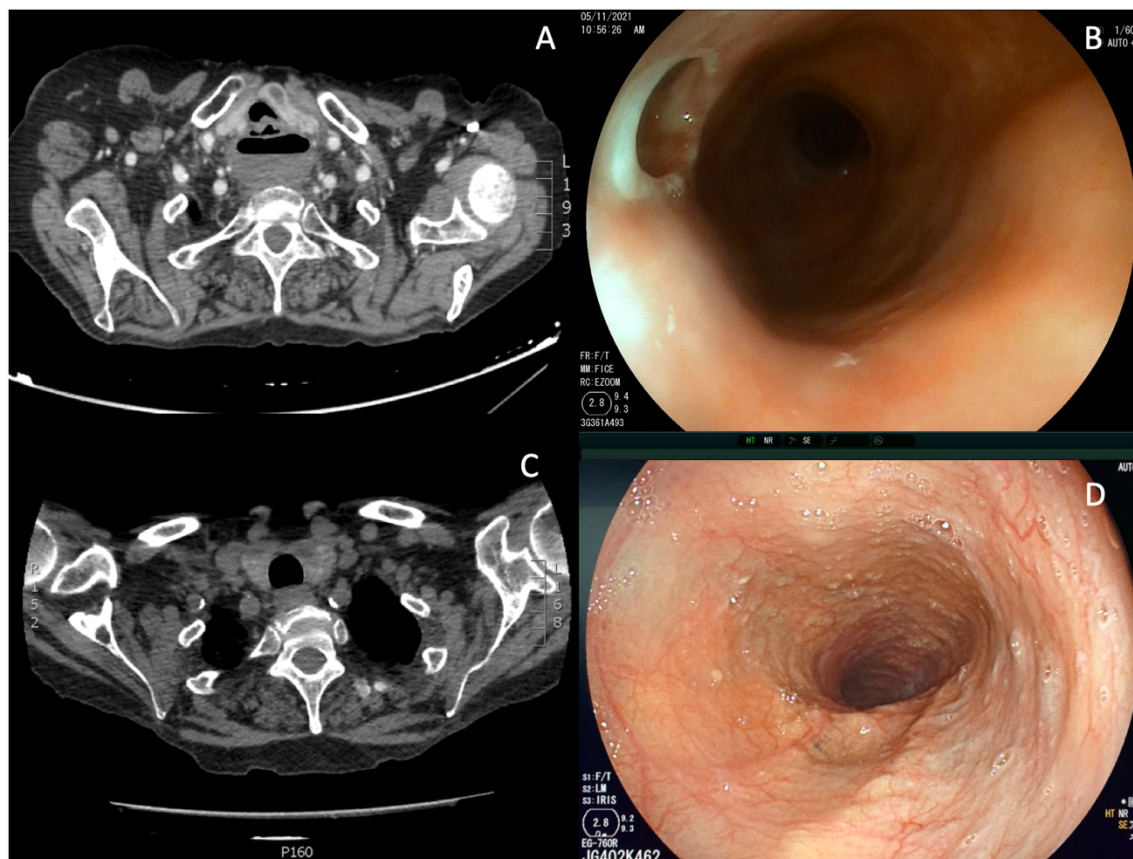


Figura 1. (A: Esophageal perforation with collection associated with the CT diagnosis.
 B. Endoscopic image of esophageal perforation. C: Resolution of the collection and
 perforation closure after treatment with EsoSponge on CT. D: Esophageal endoscopic
 image of perforation closure after endoscopic therapy with the Eso-Sponge system).