



## A Unique Case Report: Gastric Pneumatosis on Computed Tomography

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### INTRODUCTION

- Gastric pneumatosis is a unique medical condition characterized by the presence of intra-mural air in the stomach associated with portal venous air tracking to a variable degree.
- Pneumatosis of the gastric wall may be suggestive of ischemia and can imply compromised circulation, however, may also be due to a benign condition.
- A severe variant of pneumatosis intestinalis, emphysematous gastritis has been traditionally considered to have mortality rates as high as 60-80%.

We present a rare case of emphysematous gastritis, discovered incidentally on imaging with a favorable outcome.

### CASE DESCRIPTION

75-year-old male with Parkinson's disease, history of CVA with residual dysphagia, GERD, and Type 2 diabetes mellitus admitted for altered mental status. He had diarrhea, fatigue, decreased PO intake, and somnolence for one day. Given history of diarrhea, he was tested for C. diff and was found to be PCR positive, but negative toxin EIA. Labs remarkable for WBC 8.5K (peaking at 19.4K) and Cr 2.45. CT A/P to investigate diarrhea showed a distended stomach with emphysematous stomach, the celiac and left gastric arteries appearing normally enhanced. No evidence of an obstructive process (Figure A). Patient was managed conservatively with gastric decompression and infectious workup was unremarkable. Of note, patient had a readmission for AKI after 3 months and repeat CT A/P showed complete resolution of gastric pneumatosis (Figure B).



Figure A

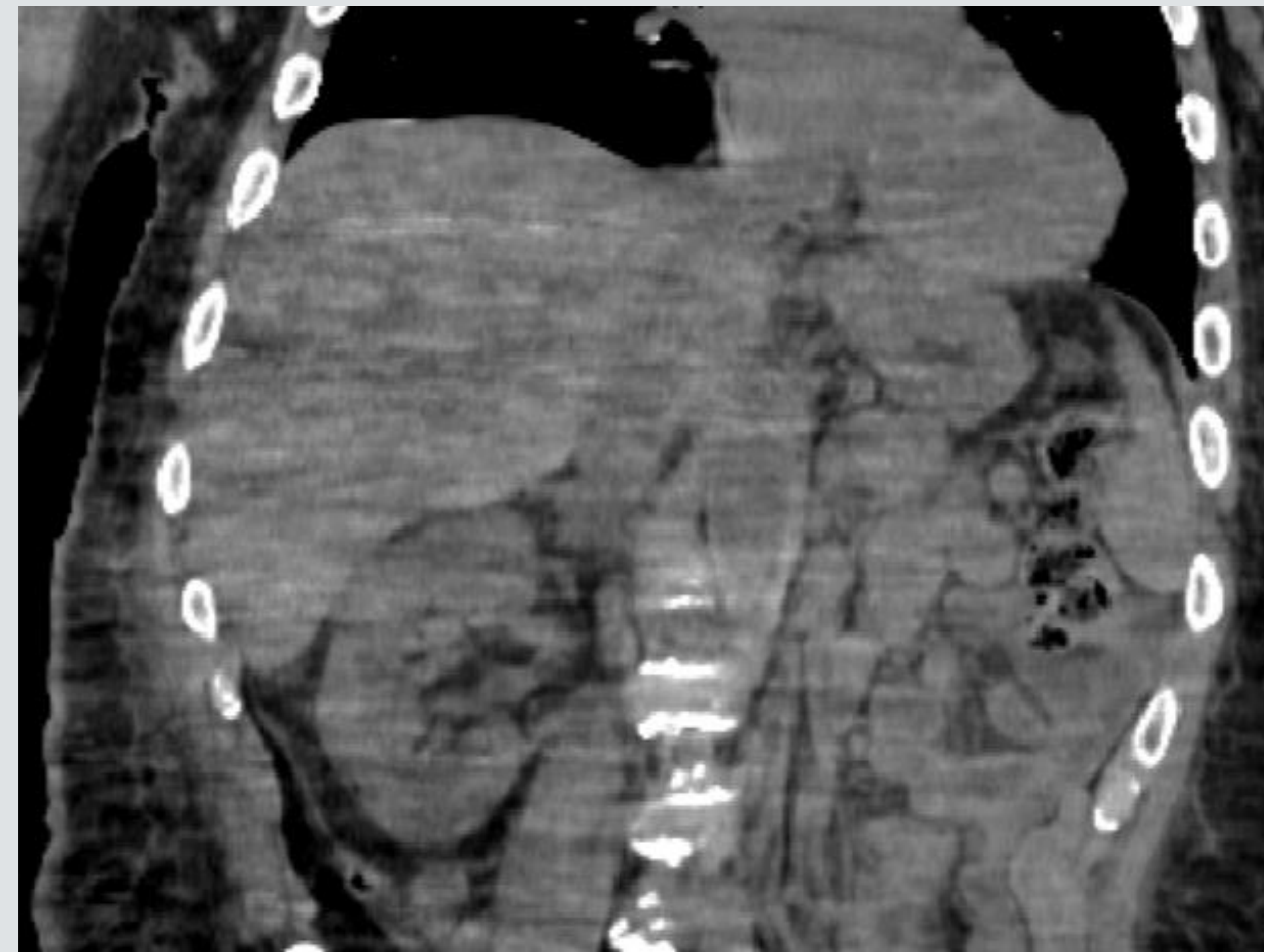


Figure B

### DISCUSSION

- Pneumatosis intestinalis is an uncommon phenomenon with the rarest forms as emphysematous gastritis.
- Literature review describes about 75 cases of emphysematous gastritis and gastric emphysema.
- Gastric emphysema is a benign condition due to a non-infectious source, mostly asymptomatic and no hemodynamic compromise.
- Emphysematous gastritis, however, can present with significant symptoms such as septic shock.
- Gas producing organisms invade the gastric mucosa resulting in a systemic inflammatory response however no organisms are found in many cases.
- Various predisposing factors have been described in the literature including diabetes, renal failure, peptic ulcer disease, and alcohol abuse.
- Treatment can be surgical or conservative, with the correction of any fluid and electrolyte imbalance.
- Mortality of emphysematous gastritis has been estimated to ~60-80%, while the overall mortality of gastric emphysema is ~29%.

We present this unique case to highlight importance of conservative management in emphysematous gastritis without ischemia.

### REFERENCES

Available upon request.