

Introduction

- Gastrointestinal hemorrhage secondary to esophageal varices is frequently encountered by gastroenterologists.
- Endoscopic variceal band ligation is a procedure that has the potential for complications.
- However complete esophageal obstruction due to band ligation is very uncommon.

Case Description

- 80-year-old inability to tolerate oral secretions and chest discomfort for 24 hours. She underwent endoscopic variceal band ligation for primary prophylaxis.
- Upper endoscopy revealed a mushroom-like appearance of mucosa in the mid-esophagus, with full circumferential banding of esophageal lumen causing complete obstruction.
- Patient consented to a possible need for transjugular intrahepatic portosystemic shunt placement as rescue therapy in case of acute variceal bleeding following endoscopic intervention.

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Mushroom Sign: Complete Esophageal Obstruction Following Endoscopic Variceal Band Ligation

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Figure 1: (A) Mushroom Sign. (B) Band grabbed with loop cutter. (C) Predilated stricture. (D) Balloon dilation

- mm.

• On repeat endoscopy, band was grabbed with loop cutter, with gentle pulling pressure applied resulting in removal of the band uneventfully (Figure 1). Esophageal mucosa had circumferential mushroomlike edematous mucosa with ulcerated base of 10

Due to ongoing obstruction, balloon dilation performed to prevent further stricture formation and open the esophagus lumen successfully. After successful recovery, plan for repeat endoscopic dilation in a week for recurrent dysphagia

Discussion

Complete esophageal obstruction from variceal band ligation is very rare. Cases with partial obstruction or patients who can handle secretions can be managed with supportive care.

In this case, we removed the band with loop cutter as this was a complete obstruction and patient was at risk for aspiration and airway compromise. This case should illustrate the importance of spiral banding technique and aiming towards one column of varices at a time.

Practicing gastroenterologists and trainees should be aware of this rare complication.



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