

A Rare Diagnosis

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Introduction

Emphysematous gastritis (EG) is a rare condition characterized by the presence of gas within the gastric wall in association with clinical sepsis. This entity has a high mortality rate, and early diagnosis and treatment are essential to prevent progression of this potentially fatal condition. Here we describe a rare case of EG in a middle-aged female presenting with diffuse abdominal pain and vomiting.

Case Description/Methods

- A 64-year-old female with no pertinent gastrointestinal history presented to the emergency department with a one-week history of generalized abdominal pain and non-bloody emesis
- On arrival, she was tachycardic with a heart rate of 112 beats per minute but was otherwise hemodynamically stable and afebrile
- Physical examination was significant for diffuse tenderness to palpation in all four abdominal quadrants
- Initial complete blood count revealed a white blood cell count of 14,100 per microliter of blood and complete metabolic panel revealed no abnormal values

Results



Figure 1: Abdominal and pelvic computed tomography without contrast showing air within the wall of the gastric body and gastric fundus representative of emphysematous gastritis.

Case Description/Methods (Continued)

- CT abdomen/pelvis showed air within the wall of the gastric body and gastric fundus with findings most consistent with emphysematous gastritis
- The patient underwent treatment with bowel rest, intravenous fluid resuscitation, a proton-pump inhibitor, and broad-spectrum antibiotic therapy
- Her symptoms gradually improved, her diet was advanced, and she was discharged without complaints

Discussion

- Emphysematous gastritis is a rare, but potentially fatal condition caused by gas-forming microorganisms with a mortality rate of 55-61%
- Early diagnosis and initiation of conservative medical management has been shown to reduce mortality and the need for surgical intervention
- Surgical exploration is reserved for patients who demonstrate signs of clinical deterioration, perforations, peritonitis, uncontrolled disseminated sepsis or who have failed optimal medical management
- Here we describe a case of EG in a female presenting with manifestations of sepsis that was treated successfully with conservative medical management

Take-Home Point

This case report adds to the limited literature on the clinical course and treatment of this rare disease by supporting the notion that surgical intervention may be foregone if the patient is stable and medical management is successful.