

Clinical Image

Plummer-Vinson Syndrome with Middle Third Cervical Esophagus Web

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Citation: Bouomrani S, Ammar E (2019) Plummer-Vinson Syndrome with Middle Third Cervical Esophagus Web. Arch Gastroenterol Hepatol 1: 109. DOI:10.29011/AGEH-109/100009

Received Date: 05 September, 2019; **Accepted Date:** 09 September, 2019; **Published Date:** 16 September, 2019

Plummer-Vinson Syndrome (PVS) is a rare entity nowadays (0.3%-1.1% in women overall) [1,2], and remains an unusual etiology of dysphagia [3]. It is characterized by the association of iron deficiency anemia and esophageal webs. The webs are exclusively located in the upper esophagus (post cricoid level) [1-3]. The dysphagia represents the major symptom revealing this syndrome, but often remains neglected and misdiagnosed by primary care physicians [1]. A better knowledge and an early diagnosis of this syndrome is recommended for any health practitioner because of the high risk of malignancy (10-16% of cases are associated with hypo-pharyngeal or esophageal cancers) [1-3].

A 48-year-old woman, with no pathological medical history, consulted her primary care physician for dysphagia, particularly marked for liquids. His somatic examination was without abnormalities. His complaints have been neglected and taken for "soma-toform symptoms". She was treated with anxiolytics but without any improvement.

The physical examination at our consultation noted marked cutaneous and conjunctival pallor with no other associated signs; in particular, there was no fever, active skin lesions, lymphadenopathies, or hepatosplenomegaly.

Basic biology revealed hypochromic microcytic anemia with hemoglobin at 9.7 g/dl without further abnormalities.

Barium swallow radiography revealed regular and circumferential stenosis of the middle third of the cervical esophagus (Figure 1), and fibroscopy confirmed the existence of an annular web of the middle third of the cervical esophagus. The diagnosis of PVS was retained.



Figure 1: Barium-swallow esophagography/ lateral view: regular and concentric stenosis at the middle portion of the cervical esophagus.

After one month of oral iron supplementation, hemoglobin was corrected and dysphagia completely disappeared.

Our observation of PVS is characterized by the unusual location of the web in the middle third of the cervical esophagus.

Conflicts of Interest

None.

References

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