

Zenker's diverticulum

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Zenker's diverticulum is an outpouching of the mucosa through a potential weakness in the posterior pharyngeal wall. Affected individuals are usually men in their seventh or eighth decades and present with dysphagia, regurgitation of undigested food, halitosis, aspiration pneumonia or a swelling in the left side of the neck with a gurgling sound on palpation [1]. A 65-year-old lady recently presented with difficulty in swallowing and regurgitation of food for 6 months. The endoscopy done showed a blind pouch with vegetable material (Fig. 1a) at the level of cricopharynx, anteriorly displaced esophageal lumen

proper (Fig. 1b) with a septum in-between, suggestive of Zenker's diverticulum, confirmed on a barium esophagogram (Fig. 1c). The diagnosis of Zenker's is usually confirmed using a barium esophagogram. Endoscopy is associated with a risk of perforation in an unsuspected diverticulum as its opening is most often aligned in the pharyngeal axis. Hence, intubation of the esophagus should be done gently, under direct vision or using a guide wire. Patients who are symptomatic may be treated by surgery or a minimally invasive endoscopic approach [1].

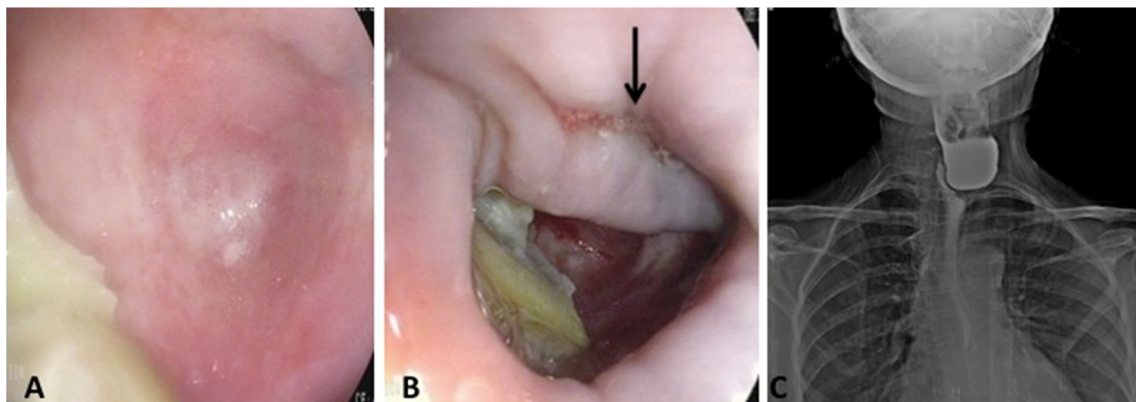


Fig. 1 a Blind pouch, b esophageal lumen and c Zenker's diverticulum

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