A Case of Stomach in $\lambda$ Shape

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Introduction

Congenital anomalies of the stomach are rare. The most common developmental abnormality of the stomach is hypertrophic pyloric stenosis. Gastric atresia or antral atresia is rare and this anomaly may be found in adults as well as in infants. Most of the patients have the condition in which the stomach is totally occluded by a blindly ending stomach and a thin diaphragm or web in the distal stomach unassociated with peptic ulcer disease. Also it is predictable that certain congenital anomaly can arised from the developmental malrotation. But the congenital malrotation of the stomach has been less defined and more over looked than other anomaly. We report a case of anomaly of the stomach which is suggested to be arised from the developmental
malrotation. This stomach consists of blinded antrum associated with abnormal pyloric opening on incisura angularis and its appearance is similar to λ shape of which the outlet is extended form in midportion of the body.

Case of Report

A 50-year-old man visited our outpatient department in March 1987 with a over 20 year history of hunger pain, dyspepsia, indigestion and borborygmi. Three years ago he drank a alcohol moderately and he had a previous history of medication because of dyspepsia. The hemoglobin was 12.8 g/dl, the leucocyte count 4.8×10^9/ml. No specific abnormality was found in liver function test and urine analysis. The x-ray study of upper gastrointestinal series was checked and revealed that the unusual position of pylorus and duodenal bulb which was extended from midportion of the body, and blinded gastric antrum. There were well maintained wall pliability and peristaltic waves, and the small ulcer crater on the antrum with radiating fold(Fig. 1).

Immediately the upper gastroendoscopic examination was performed and it was found that the pyloric opening located on the gastric angle with normal mucosal pattern and the linear superficial ulceration on the antral mucosa of the stomach(Fig. 2). Abdominal computed tomography scan suggested the unusual position and malrotation of the stomach.