



Image of the Month

Double pylorus

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A 56-year-old male presented with progressive upper abdominal pain for 5 days at our department. He had neither undergone endoscopy nor recently used non-steroidal anti-inflammatory drugs. He underwent his first upper gastrointestinal endoscopy, showing two openings, which were separated by a bridge, between gastric antrum and duodenal bulb (Fig. 1A, upper panel). A closer endoscopic observation also demonstrated an ulcer in one of the two openings (Fig. 1A, lower panel). Thus, a diagnosis of double pylorus with an ulcer in the gastroduodenal fistula was diagnosed. Oral pantoprazole and aluminium phosphate gel were prescribed.

Since then, his abdominal symptoms gradually disappeared. Fifteen days later, he underwent a second upper gastrointestinal endoscopy, confirming the diagnosis of double pylorus (Fig. 1B upper panel) and showing that the ulcer in the gastroduodenal fistula was healed (Fig. 1B, lower panel). At that time he was in a stable condition without any other complaints.

Conflict of interest

None declared.

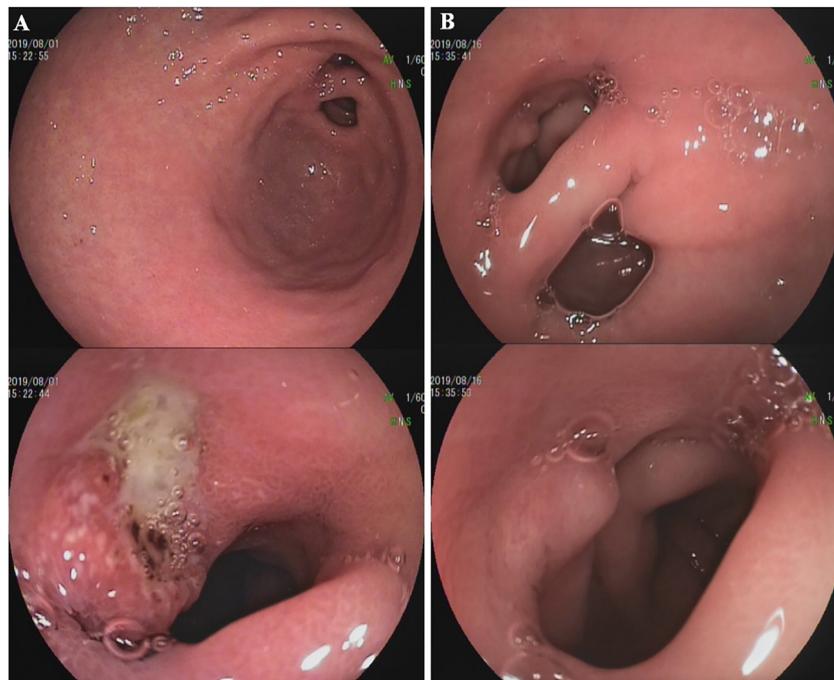


Fig. 1. First (A) and second (B) upper gastrointestinal endoscopy.

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