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Journal of Hospital Pharmacy
An Official Publication of Bureau for Health & Education Status Upliftment
(Constitutionally Entitled As Health-Education, Bureau)

JOHP

Killian – Jamieson Diverticulum: A Rare Cause of Dysphagia

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ABSTRACT:

Killian-Jamieson Diverticulum (KJD) is a rare diverticulum arising from a muscular gap in the anterior-lateral wall of the proximal cervical oesophagus, just below the cricopharyngus muscle and superior-lateral to the longitudinal muscle of the oesophagus^[1]. This condition requires cricopharyngeal and oesophageal myotomy, but diverticulotomy is sufficient for surgical treatment of Killian-Jamieson diverticulum. Thus, accurate preoperative diagnosis is indispensable for avoiding unnecessary invasive surgery. Usually barium esophagram and axial computed tomography (CT) scans can localize the origin of these sacs and helps to determine the type of diverticulum. We present a case of a 53-year-old female with symptoms of difficulty in swallowing for 3 weeks. She had a past medical history of systemic hypertension and was taking TAB TELMISARTAN 40mg twice daily and TAB ATENOLOL 50mg twice daily. CT scan of the neck revealed focal air filled out pouching measuring 8.6 x 6.4 x 11 mm from the proximal cervical oesophagus at the C6-C7 level on the left side. Patient was successfully managed with diverticulectomy and myotomy.

KEYWORDS:

Killian-Jamieson Diverticulum, diverticulectomy, esophagram, sterno-cleido mastoid muscle, manometry

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Website: http://www.journalofhospitalpharmacy.in	Quick Response Code:
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