

中文題目：胃臟移位至右側胸部以擬似膿胸之影像學表現

英文題目：Right thoracic stomach mimicking pleural empyema in an elderly man

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## Introduction

Hiatal hernia was herniation of the abdominal elements via the diaphragmatic hiatus. It may present with sliding, paraesophageal and mixed paraesophageal hernia. Sliding hernia was the most common type, in which the gastroesophageal junction was pulled above the diaphragmatic hiatus. Typically, most hernia located in the midline or the left hemithorax. However, a right hemithorax hiatal hernia with nonobstructive organoaxial torsion is rarely reported. Here, we reported the common sliding type hernia with very unusual manifestation.

## Case presentation

An 82-year-old man visited our clinic due to cough about 5 days. He denied significant epigastralgic pain or heart burning sensation in the past. The physical examination was normal and the laboratory findings were within normal limit. Chest radiograph (CXR) showed opacity with an air-fluid level in the right lower hemithorax behind the right heart and obscured the right hemidiaphragm. (Fig 1) The CXR also revealed absence of the gastric air bubble in the left subdiaphragmatic region. Chest computed tomography (CT) revealed the gastroesophageal junction was above the diaphragm, the stomach lay in the right lower hemithorax with depressed right hemidiaphragm and the greater curvature of stomach adjacent to the right chest wall. Other abdomen organs such as the duodenum and liver were situated normally. (Fig 2) Sliding hiatal hernia with omentum and stomach herniation with nonvolvulus organoaxial rotation to the right hemithorax was confirmed.

## Discussion

The right thorax stomach was a very rare congenital abnormality. It may be attributed to congenital dextrogastric<sup>1</sup> or congenital hiatal hernia with organoaxial torsion<sup>2,3</sup> The right side hiatal stomach hernia may have male predominance and family history.<sup>2,4</sup> Unlike other congenital diaphragm defects of infancy, right hemithorax stomach

herniation was not life threatened and most sliding hiatal hernia was asymptomatic. It was often discovered later in childhood or adult incidentally by CXR examination. From the initial CXR finding, the differential diagnosis includes Morgagni's hernia, Bochdalek's hernia, lung abscess, empyema or mass lesion...etc. Chest CT was a helpful tool to assist the diagnosis.