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# Salivary Gland Choristoma: A Rare Finding at Gastroesophageal Junction

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# Salivary Gland Choristoma: A Rare Finding at Gastroesophageal Junction

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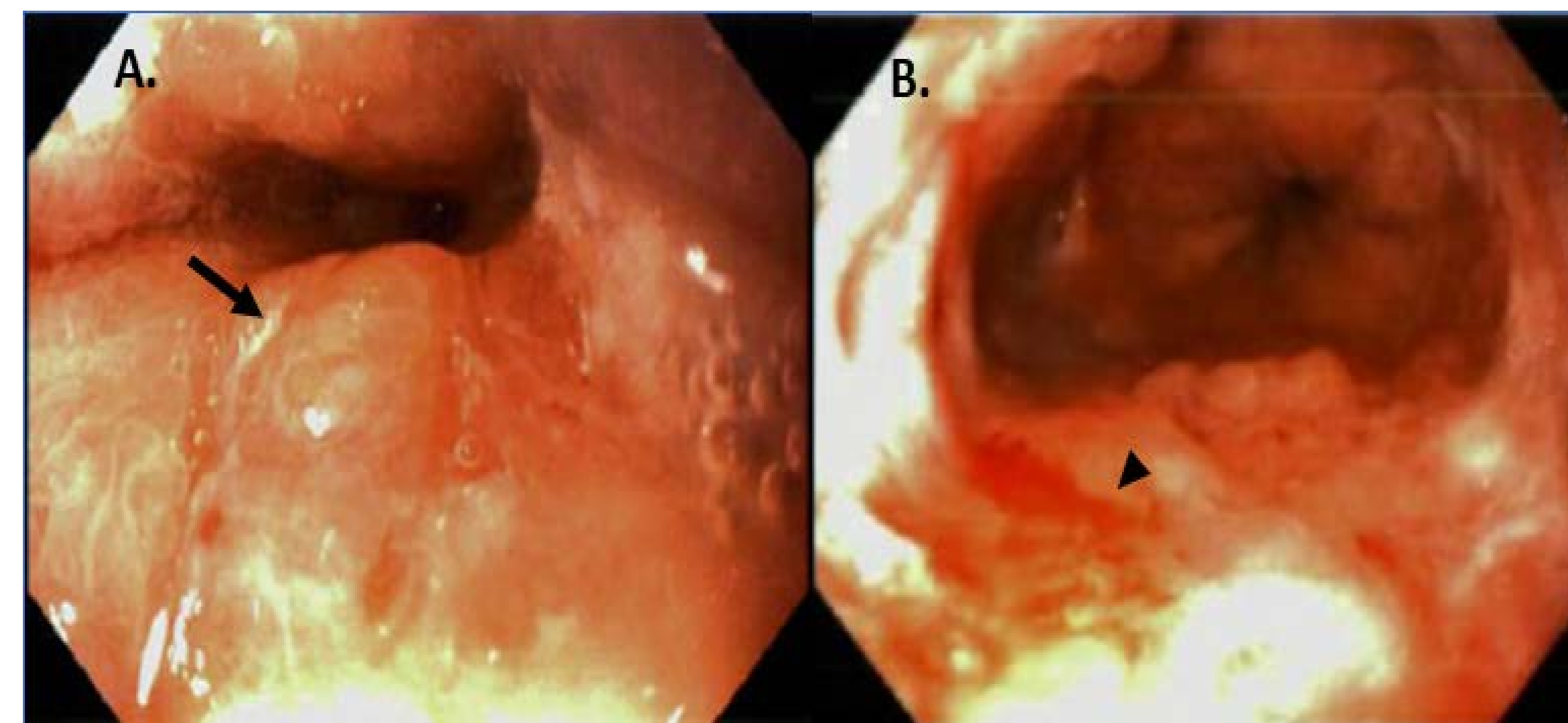
## Introduction

- ✓ Choristoma is tumor-like outgrowth of heterotopic and mature tissue located at anatomically unusual sites.<sup>1</sup>
- ✓ Heterotopic salivary gland tissue (HSGT) has been most commonly described in head and neck region but can rarely involve gastrointestinal (GI) tract with a few cases reported in the literature.<sup>2-4</sup>
- ✓ Salivary gland choristoma at the gastroesophageal junction (GEJ) is an extremely rare entity, with only one case reported in the English literature.<sup>4</sup>

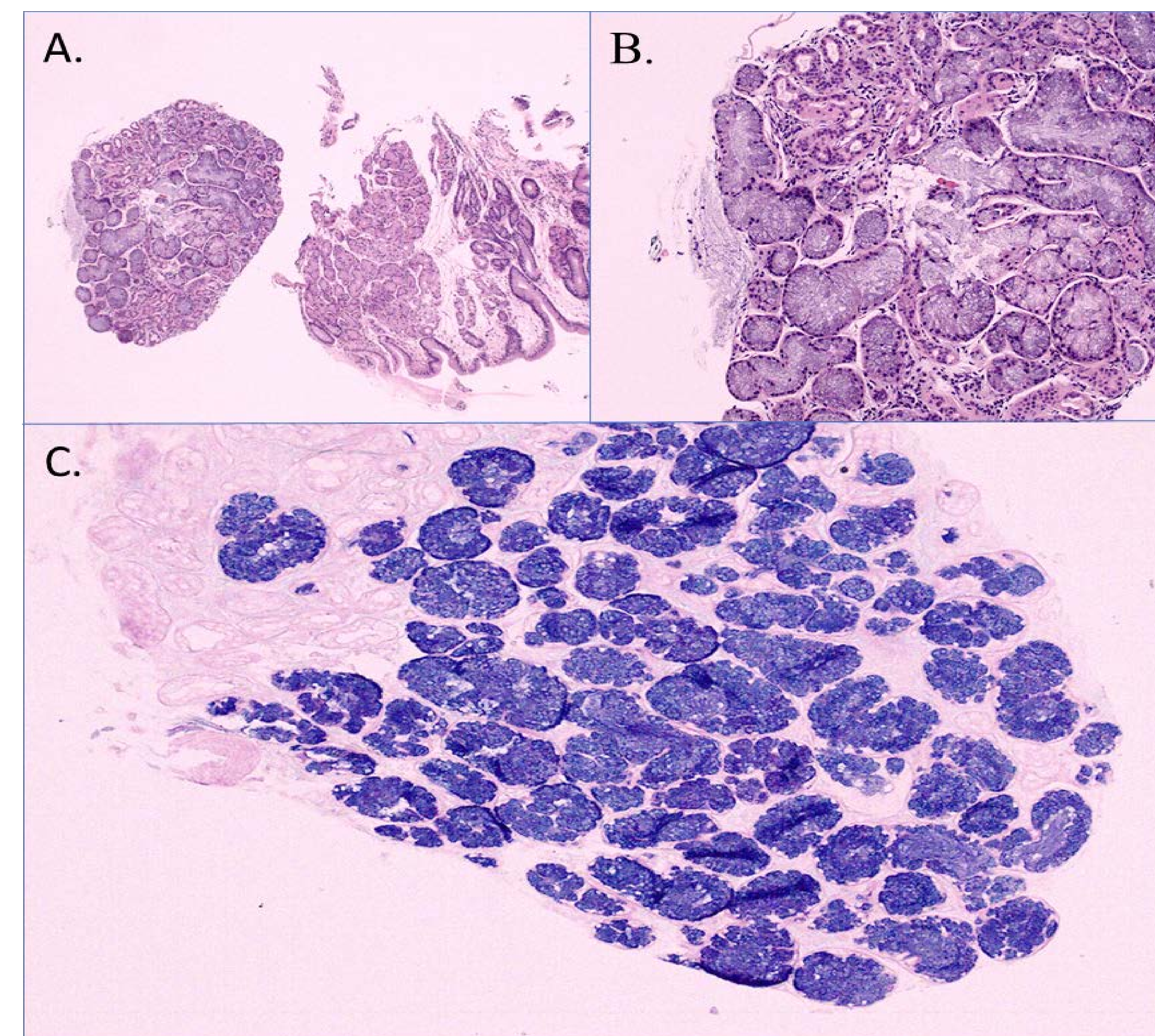
## Case Presentation

- ✓ An 87-year-old female with past medical history of gastroesophageal reflux disease (GERD), hypertension, and chronic kidney disease was admitted for an acute deep vein thrombosis.
- ✓ Due to worsening anemia, she underwent an upper endoscopy that showed a small nodularity at the GE junction (figure 1a), a large hiatal hernia, and reflux esophagitis in the lower one-third of the esophagus (figure 1b).
- ✓ Biopsy of the nodule demonstrated an esophagogastric junction-type mucosa with mild to moderate chronic inflammation, mild acute inflammation and focal glandular tissue consistent with heterotopic salivary gland tissue (figure 2a-c). No intestinal metaplasia or dysplasia were noted.

## Case Presentation (cont'd)



**Figure 1.** EGD showing a small nodularity at the GE junction (A, arrow), and reflux esophagitis (B, arrowhead) in the lower one-third of the esophagus.



**Figure 2.** A focal glandular tissue was noted next to the esophagogastric junction-type mucosa with mild to moderate chronic inflammation (A, B). The focal glandular tissue was consistent with heterotopic salivary gland tissue. (C)

## Discussion

- ✓ It is well-known that intestinal columnar metaplasia at the GEJ can occur secondary to chronic acid exposure and inflammation in the setting of GERD. The origin of these intestinal glandular cells remains unknown.<sup>5,6</sup>
- ✓ Furthermore, pancreatic acinar metaplasia at the GEJ is a relatively common finding, but the causative relationship with GERD is obscure.<sup>7</sup>
- ✓ Salivary gland choristoma of the GEJ could be a metaplastic change in the setting chronic inflammation as a result of reflux esophagitis. However, the biological and clinical significance of this finding is yet to be investigated.

## References

- 1- Patel, V. N. and M. P. Hoffman (2014). "Salivary gland development: a template for regeneration." *Semin Cell Dev Biol* **25-26**: 52-60.
- 2- Ferlito, A., et al. (1999). "A review of heterotopia and associated salivary gland neoplasms of the head and neck." *J Laryngol Otol* **113**(4): 299-303.
- 3- Wang, C., et al. (2014). "Salivary gland choriostoma in the esophagus." *Endoscopy* **46 Suppl 1 UCTN**: E658-659.
- 4- Abdul Karim, L., et al. (2018). "Salivary Gland Heterotopia in the Gastroesophageal Junction: A Case Series and Review of the Literature." *Case Rep Gastrointest Med* **2018**: 6078581.
- 5- Rhee, H. and D. H. Wang (2018). "Cellular Origins of Barrett's Esophagus: the Search Continues." *Curr Gastroenterol Rep* **20**(11): 51.
- 6- Guillem, P. G. (2005). "How to make a Barrett esophagus: pathophysiology of columnar metaplasia of the esophagus." *Dig Dis Sci* **50**(3): 415-424.
- 7- Johansson, J. (2010). "Pancreatic acinar metaplasia in the distal oesophagus and the gastric cardia: prevalence, predictors and relation to GORD." *J Gastroenterol*, **45**(3), 291-299.