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Summary

OESOPHAGEAL INVOLVEMENT IN A PATIENT WITH BULLOUS PEMPHIGOID AND ACQUIRED HEMOPHILIA A: A RARE ENTITY

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UEG Week Copenhagen 2023 | Poster

Oesophagus

October 15, 2023

An 81-year-old man with bullous pemphigoid presented with severe esophageal lacerations and hemodynamic instability, ultimately diagnosed with esophageal involvement from pemphigoid complicated by acquired hemophilia A triggered by his autoimmune disorder.

KEY POINTS

- Gastroscopy revealed obliteration of esophageal mucosa throughout the esophagus with deep diffuse lacerations extending to the muscle layer, hemorrhagic content, and thrombi in the lumen.
- Laboratory workup revealed persistent activated partial thromboplastin time with confirmed factor VIII acquired inhibitor, leading to diagnosis of acquired hemophilia A triggered by the patient's autoimmune disorder.
- Treatment consisted of a six-week course of oral corticoids, cyclophosphamide, and eptacog alfa (activated recombinant coagulation factor VII) administered as bolus intravenous infusion.
- Repeat endoscopy one month after admission showed complete mucosal healing of the esophagus, and the patient was discharged without further complications.
- The authors note that this case demonstrates the potential severe gastrointestinal impact of systemic diseases and the importance of considering past medical history when evaluating severe endoscopic findings.

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