Dear Editor,

In this article we wanted to share endoscopic images of our patient with gastric fundal diverticulum which is a rare localization in the gastrointestinal tract diverticular disease and aimed to give a short information with literature. A gastric fundus localized diverticulum with an orifice about 1 cm diameter was seen during the upper gastrointestinal endoscopic evaluation, which performed to 52-year-old female patient with dyspeptic complaints (Figure 1 and 2). Antral gastritis and Helicobacter pylori infection were also detected and all of the symptoms of the patient were disappeared as a result of dietary counseling, lifestyle changes and drug therapy.

Figure 1. Fundal diverticulum in the endoscopy

Figure 2. The appearance of the diverticulum in the endoscopic retroversion

Gastric diverticula are extremely rare gastrointestinal pathology. The prevalence in the autopsy based studies vary between 0.04% and 0.02% (1). They are usually asymptomatic and often diagnosed incidentally during upper gastrointestinal endoscopic or radiologic examinations (1). Instead of the asymptomatic cases which do not require any treatment, the patients who have symptoms such as epigastric pain, dyspepsia, nausea, dysphagia or gastrointestinal bleeding may require various treatments, depending on the severity of symptoms (2).

There are some important points for the diagnosis and the treatment of gastric diverticulum. In such cases which are miscible cardia localized diverticulum and paraesophageal hernias, the use of a combination of endoscopic and radiological examinations will facilitate diagnosis. Emergency surgery is inevitable when there are severe complications such as obstruction, bleeding or perforation (2-4).

However, the relationship between the diverticulum and symptoms should be well analyzed in patients with dyspeptic symptoms. In those patients, who have gastroduodenitis or gastroesophageal reflux disease, treatment of the primary disease, should lead to disappearance of symptoms. As the relationship between gastric diverticulum and malignancy development in the diverticulum were found in a small number of cases (5), we believe that the patients with asymptomatic gastric diverticulum should be followed up, although there is no consensus in asymptomatic patients treatment and follow up.

REFERENCES