

Un hallazgo endoscópico poco común: *Kissing gastric ulcers*

A rare endoscopic finding: *Kissing gastric ulcers*

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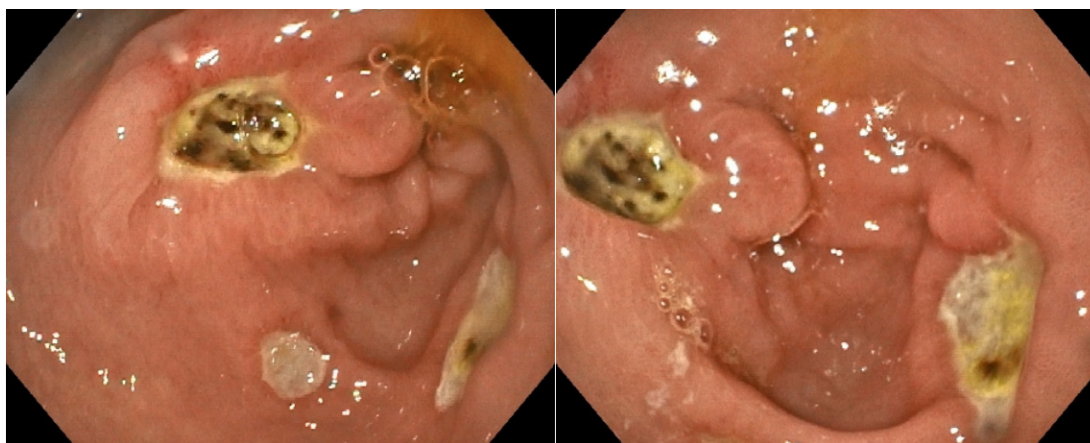


Figure 1

CASE REPORT

An 80-year-old female presented to the emergency department with complaints of facile fatigue and melena persisting for the preceding 3 days. She had been administering injectable and oral diclofenac for 2 weeks to alleviate gonalgia. The patient presented with hemodynamic stability. Upon physical examination, she exhibited pallid mucous membranes and observed melena with stool consistency indicative of gastrointestinal bleeding. Her hemoglobin concentration was measured at 5.3 g/dL. Upper gastrointestinal endoscopy (Figure 1) revealed the presence of two ulcers in the antrum, positioned diametrically across the gastric walls, measuring approximately 10-15 mm each, both classified as Forrest IIc ulcers. Histological examination of biopsy samples from both ulcers showed no evidence of malignancy or *Helicobacter pylori* infection. The patient was advised to discontinue NSAID usage and initiated therapy with proton pump inhibitors. Endoscopic reassessment after an 8-week course of treatment demonstrated signs of ulcer healing.

CONFLICTS OF INTEREST

The authors declare that there were no conflicts of interest in carrying out the present work.

FUNDING SOURCES

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ETHICAL ASPECTS

All participants submitted a consent form to be included in this study.

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DISCUSSION

We present a case of kissing gastric ulcers secondary to NSAID intake. While commonly reported in the duodenum, kissing ulcers are infrequently encountered in the gastric mucosa¹. These lesions are characterized by the presence of two ulcers situated on opposite walls of the stomach or duodenum². Although the precise etiology remains incompletely elucidated, this atypical condition may arise from sudden abdominal trauma or acute NSAID ingestion^{1,2}. Discontinuation of NSAID analgesics, coupled with the administration of proton pump inhibitors, results in complete remission.

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