

Dieulafoy's lesion: a rare but potentially life-threatening cause of gastrointestinal bleeding

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An 87-year-old female presented with symptomatic anaemia and melaena, requiring transfusion of five units of blood. An urgent oesophago-gastro-duodenoscopy was performed, revealing Dieulafoy's lesion in the third part of the duodenum (**Figure 1**). She was stabilised with the placement of a clip and an adrenaline injection.

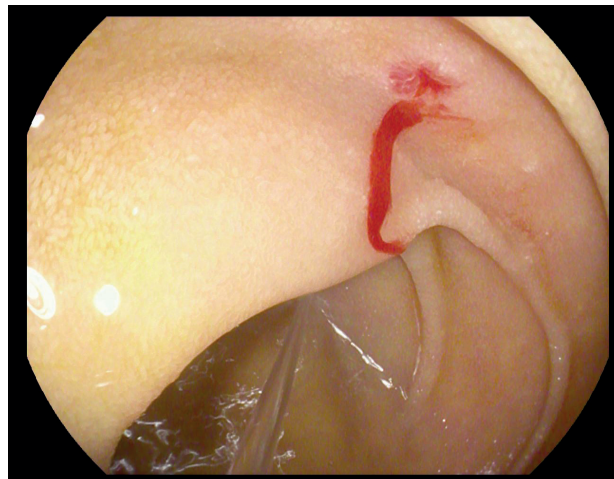


Figure 1. Small duodenal Dieulafoy's lesion with oozing blood.

Dieulafoy's lesion is a submucosal arterial malformation that protrudes through the mucosa. It may result in intermittent, life-threatening gastrointestinal haemorrhage, accounting for approximately 1–2% of all cases of upper gastrointestinal bleeding (Marangoni et al, 2009). Most common in the stomach, lesions have been found elsewhere in the gastrointestinal tract (Nojkov and Cappell, 2015). It occurs more frequently in males and has a mortality rate of up to 80% (Baxter and Aly, 2010). Treatments include thermocoagulation and adrenaline injections. If endoscopic approaches are unsuccessful, angiography and surgical resection are recommended (Jeon and Kim, 2015). Dieulafoy's lesions should be considered in patients presenting with gastrointestinal bleeding without peptic ulceration.

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How to cite this article:

Apthorp E, Mungai Ndungu M, Rumwanpura K, Rahmani MJH. Dieulafoy's lesion: a rare but potentially life-threatening cause of gastrointestinal bleeding. *Br J Hosp Med.* 2023. <https://doi.org/10.12968/hmed.2023.0234>