Answer: Heterotopic gastric mucosal patch of the proximal oesophagus or cervical inlet patch.

The image showed two distinctive salmon coloured patches located in the proximal oesophagus. Biopsy from the lesion located at 5 o’clock was reported as follow: ‘The presence of glandular epithelium containing antral and gastric body type glands. The lamina propria is infiltrated by a moderate number of lymphocytes. Immunological staining was strongly positive for surface epithelium with CK20, whilst CK7 was weakly positive for surface epithelium and deep glands. Special stain for *helicobacter pylori* was negative. The appearances are those of cervical inlet patch.’

Heterotopic gastric mucosal patch (HGMP) of the proximal oesophagus is a congenital anomaly that consists of islands of ectopic gastric mucosa. It can be small and inconspicuous (Panel a) to large and very obvious (Panel b). It has been reported to occur anywhere along the gastrointestinal tract. Its pathogenesis remains unclear. It has been suggested that HGMP comprises of oesophageal columnar embryologic remnants that had failed to transform to squamous lining during the foetal development period.

HGMP are most commonly found in the proximal oesophagus usually located anywhere between 16 to 24 cm from the incisors, corresponding to just distal to the upper oesophageal sphincter. Due to its location, HGMP can be easily missed. Patients affected by HGMP may be asymptomatic or present with multitude of symptoms, particularly those of protracted oropharyngeal symptoms. Patients with HGMP have been shown to experience more laryngopharyngeal reflux symptoms.

Malignant transformations of HGMP have been reported. Acid suppression treatment remains the mainstay of treatment and will require prolonged treatment. Other modalities reported include laser ablation and endoscopic mucosal resection.

REFERENCES
2: Chong VH, Jalihal A. Heterotopic gastric mucosal patch of the esophagus is associated with higher prevalence of laryngopharyngeal reflux symptoms. Eur Arch Otorhinolaryngol. 2010 May 1. [Epub ahead of print]