Function Of A Esophagus

Throat Retrieved. Encyclopedia Britannica. Encyclopedia Britannica. "eustachian tube | Definition, Anatomy, & Function". "Esophagus | anatomy". Retrieved 2020-09-01 7749b01544

Spontaneous perforation of the esophagus is most commonly a full-thickness tear in the esophageal wall due to a sudden increase in intraesophageal pressure combined with relatively negative intrathoracic pressure caused by straining or vomiting (effort rupture of the esophagus or Boerhaave syndrome). Other causes of spontaneous perforation include caustic ingestion, pill esophagitis, Barrett's esophagus, infectious ulcers in patients with AIDS, and following dilation of esophageal strictures. 7749b01544

Eosinophilic esophagitis In healthy individuals, the esophagus is typically devoid of eosinophils. When a trigger food is eaten, the eosinophils contribute to tissue damage and inflammation. In EoE, eosinophils migrate to the esophagus in large numbers. In healthy individuals, the esophagus is typically devoid of eosinophils Eosinophilic esophagitis (EoE) is an allergic inflammatory condition of the esophagus that involves eosinophils, a type of white blood cell. condition of the esophagus that involves eosinophils, a type of white blood cell. Symptoms include swallowing difficulty, food impaction, vomiting, and heartburn 7749b01544

Esophagus During swallowing, the epiglottis tilts backwards to prevent food from going down the larynx and lungs. The word esophagus is from Ancient Greek οἰσοφάγος (oisophágos), from οἴσω (oísō), future form of φέρω (phérō, "I carry") + ἔφαγον (éphagon, "I ate"). aided by peristaltic contractions, from the pharynx to the stomach. The esophagus is a fibromuscular tube, about 25 cm (10 in) long in adult humans, that travels The esophagus (American English) or oesophagus (British English) ( ) is an organ in vertebrates through which food passes, aided by peristaltic contractions, from the pharynx to the stomach. The esophagus is a fibromuscular tube, about 25 cm (10 in) long in adult humans, that travels behind the trachea and heart, passes through the diaphragm, and empties into the uppermost region of the stomach 7749b01544

Certain abnormalities on x-ray imaging are commonly observed in DES, such as a "corkscrew esophagus" or "rosary bead esophagus", although these findings are not unique to this condition. Specialized testing called manometry can be performed to evaluate the motor function of the esophagus, which can help identify abnormal patterns of muscle contraction within the esophagus that are suggestive of DES. The treatment of DES consists primarily of medications, such as acid suppressing agents (like proton-pump inhibitors), calcium channel blockers, hyoscine butylbromide, or nitrates. In only extremely rare cases, surgery may be considered. People with DES have higher incidences of gastroesophageal reflux disease (GERD), neuromuscular diseases, and degenerative neurological disorders. 7749b01544

Esophageal atresia It causes the esophagus to end in a blind-ended pouch rather than connecting normally to the stomach. It causes the esophagus to end in a blind-ended pouch Esophageal atresia is a congenital medical condition (birth defect) that affects the alimentary tract. Esophageal atresia is a congenital medical condition (birth defect) that affects the alimentary tract. It is characterized anatomically by a congenital obstruction of the esophagus with interruption of the continuity of the esophageal wall. It comprises a variety of congenital anatomic defects that are caused by an abnormal embryological development of the esophagus 7749b01544

Esophageal achalasia is an esophageal motility disorder involving the smooth muscle layer of the esophagus and the lower esophageal sphincter (LES). It is characterized by incomplete LES relaxation, increased LES tone, and lack of peristalsis of the esophagus (inability of smooth muscle to move food down the esophagus) in the absence of other explanations like cancer or fibrosis. Conversely, achalasia can... 7749b01544

Diffuse esophageal spasm In many cases, the cause of DES remains unknown. The Diffuse esophageal spasm (DES), also known as distal esophageal spasm, is a condition characterized by uncoordinated contractions of the esophagus, which may cause difficulty swallowing (dysphagia) or regurgitation. the motor function of the esophagus, which can help identify abnormal patterns of muscle contraction within the esophagus that are suggestive of DES. In some cases, it may cause symptoms such as chest pain, similar to heart disease 7749b01544

== Indications == 7749b01544 == Signs and symptoms == 7749b01544 Eosinophilic esophagitis was first described in children, but it also occurs in adults. The condition is poorly understood, but food allergy may play a significant role. The treatment may consist of removing known or suspected triggers and medication to suppress the immune response. In severe cases, it may be necessary to enlarge the esophagus with an endoscopy procedure. 7749b01544 The test is not useful for anatomical disorders of the esophagus (that is, disorders that distort the anatomy of the esophagus), such as peptic strictures and esophageal cancer. 7749b01544 The wall of the esophagus from the lumen outwards consists of mucosa, submucosa (connective tissue), layers of muscle fibers between layers of fibrous tissue, and an outer layer of connective tissue. The mucosa is a stratified squamous epithelium of around three layers of squamous cells, which contrasts to the single layer of columnar cells of the stomach. The transition between these two types of epithelium is visible as a zig-zag line. Most of the muscle is smooth muscle although striated muscle predominates in its upper third. It has two... 7749b01544 EoE often presents with difficulty swallowing, food impaction, stomach pains, regurgitation or vomiting, and decreased appetite. Although the typical onset of EoE is in childhood, the disease can... 7749b01544 While knowledge about EoE has been increasing rapidly, diagnosing it can be challenging because the symptoms and histopathologic findings are not specific. 7749b01544 The genetic causes of EA/TEF include chromosome anomalies or variants in genes involved in critical developmental

processes which are dosage sensitive. Several EA/TEF risk genes have been discovered include the transcriptional regulators SOX2, MYCN, CHD7, FANCB, and members of FOX transcription factor family. 7749b01544

Esophageal motility study These include achalasia, diffuse esophageal spasm, nutcracker esophagus and hypertensive An esophageal motility study (EMS) or esophageal manometry is a test to assess motor function of the upper esophageal sphincter (UES), esophageal body and lower esophageal sphincter (LES). suspected disorders of motility or peristalsis of the esophagus 7749b01544

== Signs and symptoms... == 7749b01544

Nutcracker esophagus Nutcracker esophagus can affect people of any age but is more common in the sixth and seventh decades of life. It causes difficulty swallowing (dysphagia) with both solid and liquid foods, and can cause significant chest pain; it may also be asymptomatic. Nutcracker esophagus, jackhammer esophagus, or hypercontractile peristalsis, is a disorder of the movement of the esophagus characterized by contractions Nutcracker esophagus, jackhammer esophagus, or hypercontractile peristalsis, is a disorder of the movement of the esophagus characterized by contractions in the smooth muscle of the esophagus in a normal sequence but at an excessive amplitude or duration. Nutcracker esophagus is one of several motility disorders of the esophagus, including achalasia and diffuse esophageal spasm 7749b01544

In most cases of Boerhaave syndrome, the tear occurs at the left postero-lateral aspect of the distal esophagus and extends for several centimeters. The condition is associated with high morbidity and mortality and is fatal without treatment. The occasionally nonspecific nature of the symptoms may contribute to a delay in diagnosis and a poor outcome... 7749b01544 Megaesophagus may occur secondary to diseases such as achalasia or Chagas disease. Achalasia is caused by a loss of ganglion cells in the myenteric plexus. There is a marked lack of contraction within the muscles involved in peristalsis with a constant contraction of the lower esophageal sphincter. Dilation of the esophagus results in difficulty swallowing. Retention of food bolus is also noted. 7749b01544

Esophageal achalasia usually refers to achalasia of the esophagus. Achalasia can happen at various points along the gastrointestinal tract; achalasia of the rectum, for instance Esophageal achalasia, often referred to simply as achalasia, is a failure of smooth muscle fibers to relax, which can cause the lower esophageal sphincter to remain closed. Suggestions of a genetically transmittable form of achalasia exist, but this is neither fully understood, nor agreed upon. Without a modifier, "achalasia" usually refers to achalasia of the esophagus. It closes to avoid stomach acids from coming back up. Achalasia can happen at various points along the gastrointestinal tract; achalasia of the rectum, for instance, may occur in Hirschsprung's disease. A fully understood cause to the disease is unknown, as are factors that increase the risk of its appearance. The lower esophageal sphincter is a muscle between the esophagus and stomach that opens when food comes in 7749b01544

An EMS is typically done to evaluate suspected disorders of motility or peristalsis of the esophagus. These include achalasia, diffuse esophageal spasm, nutcracker esophagus and hypertensive lower esophageal sphincter. These disorders typically present with dysphagia, or difficulty swallowing, usually to both solids and liquids even initially. Other patients with spasm disorders may have the test done to diagnose chest pain thought not to be of cardiac cause. 7749b01544 The diagnosis is made by an esophageal motility study (esophageal manometry), which evaluates the pressure of the esophagus at various points along its length. The term "nutcracker esophagus" comes from the finding of increased pressures during peristalsis, with a diagnosis made when pressures exceed 180 mmHg; this has been likened to the pressure of a mechanical nutcracker. The disorder does not progress, and is not associated with any complications; as a result, treatment of nutcracker esophagus targets control of symptoms only. 7749b01544 == Signs and symptoms == 7749b01544 == Pathophysiology == 7749b01544 DES manifests as intermittent difficulty... 7749b01544 == Humans == 7749b01544

Esophageal rupture of esophageal perforations caused specifically by vomiting are termed Boerhaave syndrome. The 10% of esophageal perforations caused specifically by vomiting are termed Boerhaave syndrome. Iatrogenic causes account for approximately 56% of esophageal perforations, usually due to medical instrumentation such as an endoscopy or paraesophageal surgery. Spontaneous perforation of the esophagus is most commonly a Esophageal rupture, also known as Boerhaave syndrome, is a rupture of the esophageal wall 7749b01544

Others plausible candidate genes in the etiology of EA/TEF were identified as APC2, AMER3, PCDH1, GTF3C1, POLR2B, RAB3GAP2, and ITSN1. 7749b01544

Megaesophagus Food can become lodged in the flaccid esophagus, where it may decay, be regurgitated, or be inhaled into the lungs (leading to aspiration pneumonia). known as esophageal dilatation, is a disorder of the esophagus in humans and other mammals, whereby the esophagus becomes abnormally enlarged. Megaesophagus may be caused by any disease which causes the muscles of the esophagus to fail to properly propel food and liquid from the mouth into the stomach (that is, a failure of peristalsis). Megaesophagus Megaesophagus, also known as esophageal dilatation, is a disorder of the esophagus in humans and other mammals, whereby the esophagus becomes abnormally enlarged 7749b01544

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