A 71-year-old female presented with a two-year history of intermittent dysphagia for solids and a 6 kg weight loss. An esophagram was performed, revealing an extrinsic indentation with anterior displacement of the esophagus (Fig. 1). Subsequent computed tomography angiography showed an aberrant right subclavian artery (ARSA) with a retro-esophageal course, slightly compressing the esophagus, as the probable cause of symptoms (Fig. 2).

Dysphagia lusoria is a swallowing impairment due to vascular compression of the esophagus.\(^1\)\(^4\) Typically, the causative vessel is a retro-esophageal ARSA, originating from the left-sided aortic arch, with a reported incidence of 0.5% – 2%, of which only 20% – 40% develop symptoms.\(^1\)\(^4\)\(^5\) Children generally present with respiratory symptoms, owing to a more flexible trachea, while adults develop dysphagia, because of age-related decreased vascular compliance.\(^3\)

Mild symptoms only require dietary modifications, including eating slower and chewing properly. Severe cases may warrant surgical treatment.\(^4\)

Our patient agreed with conservative treatment, showing progressive clinical improvement.

REFERENCES