A 46-year-old man who underwent a liver transplant in 2001 for fulminant hepatitis of unknown etiology was diagnosed with a liver non-Hodgkin lymphoma (post-transplant lymphoproliferative disease) in 2011. Some months later, he developed an acute hepatocellular rejection that was treated with high doses of steroids. The patient was admitted because of fever and severe odynophagia that was hindering oral intake. He had multiple painful ulcers on his tongue, palate, and oral mucosa. Upper gastrointestinal endoscopy revealed large superficial, circumferential ulcers with well-defined margins and yellow exudate in the mid and upper esophagus (Fig. 1). Biopsies taken from the ulcer base and borders confirmed herpes simplex virus (HSV) and cytomegalovirus (CMV) co-infection (Fig. 2). Polymerase chain reaction (PCR) of the esophageal mucosa for HSV and CMV DNA was positive. Human immunodeficiency virus (HIV) serology was negative. The patient’s condition rapidly deteriorated and he died from sepsis and liver failure.

Patients with HIV infection, those on chemotherapeutic agents or steroids, and transplant recipients have a high frequency of esophageal infections, although cases of multiple viral infections are very rare [1]. Long-term high-dose corticosteroids may predispose to HSV and CMV infection, although they are much less commonly diagnosed than Candida infections [2].

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References
1 Vodovnik A, Cerar A. Synchronous herpes simplex virus and cytomegalovirus esophagitis. Z Gastroenterol 2000; 38: 491–494
4 McBane RD, Gross JB. Herpes esophagitis: Clinical syndrome, endoscopic appearance, and diagnosis in 23 patients. Gastrointest Endosc 1991; 37: 600

Bibliography
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