Butterfly in the Esophagus: What Is Wrong?

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A 55-year old man was referred for an esophageal manometry after cardiologic evaluation due to chest pain. High resolution manometry was performed with ManoScan 360TM High-Resolution Manometry System (Sierra Scientific Instruments, Los Angeles, CA, USA) using a catheter with 36 pressure channels and the finding looked like flying butterflies with their wings fully spread (Fig. 1A). Considering a possibility of a U-shaped

bending of the catheter in the esophagus, the catheter was removed and re-inserted and then the butterflies disappeared (Fig. 1B). The manometric diagnosis of this case was mild peristaltic dysfunction according to the Chicago classification of esophageal motility¹ and ineffective esophageal motility according to the conventional criteria.² In conclusion, although not frequently experienced, a high resolution manometry catheter can also be hooked

Figure 1. High resolution manometry findings with 30 mmHg isobaric contour in a same case before (A) and after (B) reinsertion of the manometry catheter. (A) Each wet swallow evoked a primary peristalsis ending with two closely fused high pressure zones to which a seemingly retrograde peristalsis was linked distally. (B) Wet swallows were frequently followed by a weak or failed peristalsis.

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in the esophagus like a conventional manometry catheter³ and care should be taken not to push a catheter with an excess force if resistance is felt during insertion.

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