



# Laparoscopic Paraesophageal Hernia Repair with Nissen Fundoplication in a Patient with Ancient Schwannoma of the Gastroesophageal Junction

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## Introduction

Schwannomas are benign tumors that originate from Schwann cells in the peripheral nervous system. They are an uncommon tumor within the gastrointestinal tract and make up a relatively small percentage of benign tumors within the esophagus. A rare variant called an “ancient” schwannoma is characterized by degenerative changes on histologic examination.<sup>1</sup> This case report describes a patient who underwent resection of an ancient schwannoma at the gastroesophageal junction followed by a laparoscopic paraesophageal hernia repair and Nissen fundoplication two years later.

## Case Report

A 65-year-old female presented to her gastroenterologist complaining of bloating and weight loss. Endoscopy demonstrated a 1.5cm lesion at the gastroesophageal junction, which was clipped and excised on repeat endoscopy. Histologic examination demonstrated an ancient schwannoma. Two years afterwards, she presented to our clinic for surgical evaluation regarding a large type III paraesophageal hernia.



Figure 1. Ancient schwannoma prior to excision (left) and paraesophageal hernia prior to repair (right).

We took her to the operating room for a laparoscopic paraesophageal hernia repair and Nissen fundoplication. We performed an upper endoscopy during the case and found no recurrence of the ancient schwannoma. The case progressed well without complications. She was discharged on post-operative day one after tolerating a pureed diet. She was seen in clinic as a follow up and had advanced her diet without complaining of dysphagia

## Conclusion

This case report describes a successful surgical outcome in the unique setting of a patient with prior excision of a rare tumor from the gastroesophageal junction.

## References

1. de Bakker JK, Witteveen E, van den Bergh J, Daams F. Ancient Schwannoma of the Gallbladder. *ACG Case Rep J*. 2020;7(2):e00330. Published 2020 Feb 28. doi:10.14309/crj.0000000000000330

