Noninvasive evaluation of gastric tube blood supply with multislice computed tomography

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A 57-year-old man with esophageal carcinoma underwent total esophagectomy and cervico-abdominal reconstruction using a gastric tube. One year after surgery, a multislice computed tomography (MSCT) scan was able to evaluate the blood supply to the gastric tube by right gastroepiploic artery (Figs. 1 and 2).

Fig. 1. MSCT angiography: volume-rendering reconstruction, after subtraction of gastric tube, showing the origin of right gastroepiploic artery (yellow arrowhead) from the celiac trunk (black arrow). (For interpretation of the references to color in this figure legend, the reader is referred to the web version of the article.)

Fig. 2. MSCT angiography: volume-rendering reconstruction. Panoramic view of the gastric tube blood supply obtained by right gastroepiploic artery (white arrowheads) after subtraction of gastric tube.