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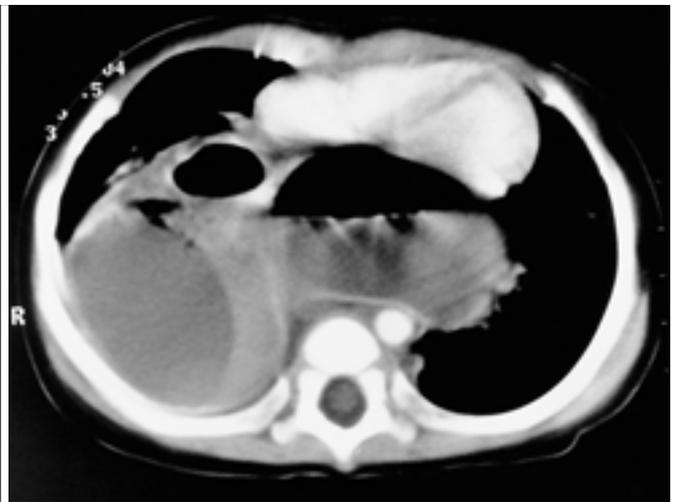
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Fig. 1. A. The chest radiograph shows soft tissue opacity in the right lower lung field that obscures the right cardiac margin and right hemidiaphragm.
B. CT shows well-defined large cystic mass in the right posterior mediastinum.
C. Barium meal examination shows complete right intrathoracic stomach and organoaxial torsion with the greater curvature lying against the right chest wall.

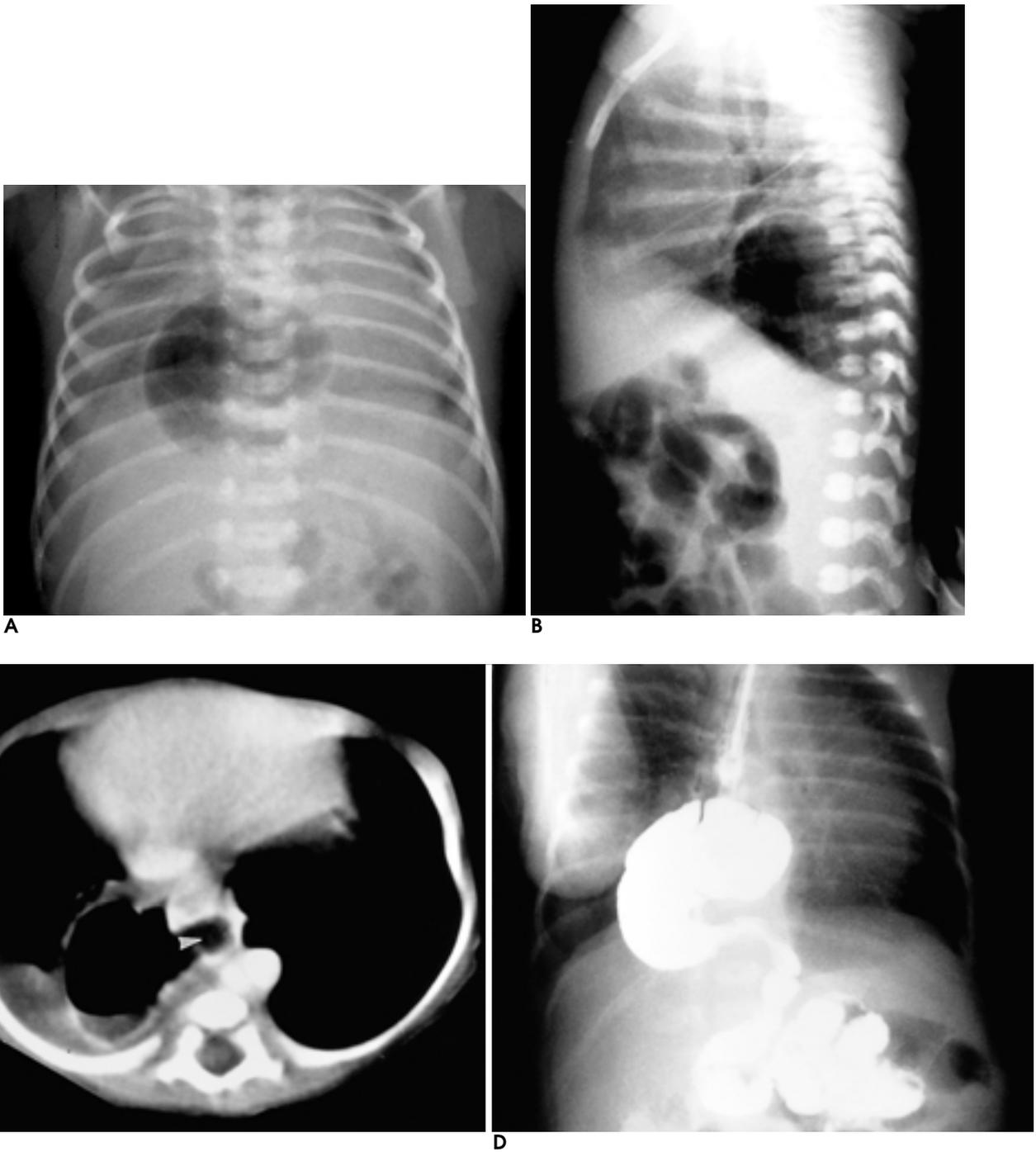


Fig. 2. A, B. The chest radiograph shows air-filled stomach-like shadow in the right posterior hemithorax. C. CT shows a cystic mass in the right posterior mediastinum. This mass is connected to the esophagus(white arrowhead). D. Barium meal examination shows a partial right intrathoracic stomach with the greater curvature lying against the right chest wall and non-obstructive orogastric torsion. The esophago-gastric junction is above the diaphragm.

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1. Hadded MC, Youssef BA, Sammak BM, Duff A. Right intrathoracic stomach secondary to congenital hiatal hernia and organoaxial torsion. *AJR Am J Roentgenol* 1996;167:66-68
2. Hubert BC. Familial right thoracic stomach. *Pediatrics* 1987;79:430-431
3. Hashemi M, Sillin LF, Peters JH. Current concepts in the management of paraesophageal hiatal hernia. *J Clin Gastroenterol* 1999;29(1):8-13
4. Ildstad ST, Stevenson RJ, Tollerud DJ, Martin LW. High apical insertion of the right diaphragm in an infant with right-sided Bochdalek diaphragmatic hernia. *J Pediatr Surg* 1990;25(5): 553-555
5. Naidich DP, Webb WR, Muller NL, Krinsky GA, Zerhouni EA, Siegelman SS. *Computed tomography and magnetic resonance of the thorax : mediastinum*. Philadelphia : Lippincott Williams & Wilkins, 1999:125-128

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Right Intrathoracic Stomach Secondary to Congenital Hiatal Hernia with Organoaxial Torsion: A Report of Two Cases¹

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Right intrathoracic stomach associated with organoaxial torsion is a rare form of congenital hiatal hernia. We report the radiologic findings in two cases of complete or partial right intrathoracic stomach secondary to congenital hiatal hernia. The barium meal test demonstrated the presence of complete or partial right intrathoracic stomach and non-obstructive organoaxial torsion with the greater curvature lying against the right chest wall. The esophagogastric junction was located above the diaphragm. CT revealed a cystic mass in the right posterior mediastinum. This cystic lesion should be differentiated from other congenital mediastinal cysts.

Index words : Gastrointestinal tract, abnormalities
Gastrointestinal tract, radiography
Stomach, abnormalities
Stomach, CT

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