



Smoker's melanosis: Isolated pigmented lesion in the laryngopharynx and esophagus

Kinesh Changela , Madhavi Reddy

Division of Gastroenterology and Hepatology, The Brooklyn Hospital Center, Clinical Affiliate of Mount Sinai Hospital, New York, USA

Cite this article as: Changela K, Reddy M. Smoker's melanosis: isolated pigmented lesion in the laryngopharynx and esophagus. Turk J Gastroenterol 2017; 28: 524-5.

Question:

A 48-year-old female with a history of chronic smoking and symptoms of weight loss and dyspepsia presented to our hospital to undergo esophagogastroduodenoscopy, which revealed blackish to brown

discoloration of the mucosa in the hypopharynx, extending to the vallecula (Figure 1). Esophagogastroduodenoscopy also revealed isolated a blackish to brown patchy lesion in the upper third of the esophagus (Figure 2).



Figure 1. Endoscopic image showing a blackish to brown discoloration of the mucosa in the hypopharynx, extending to the vallecula



Figure 2. Endoscopic image showing an isolated blackish to brown patchy lesion in the upper third of the esophagus

This study was presented at the American College of Gastroenterology, 14-19 October, Las Vegas, USA.

Address for Correspondence: Kinesh Changela E-mail: kinooo2002@gmail.com

Received: May 19, 2017

Accepted: July 16, 2017

Available Online Date: October 25, 2017

© Copyright 2017 by The Turkish Society of Gastroenterology • Available online at www.turkjgastroenterol.org • DOI: 10.5152/tjg.2017.17186

Answer: Smoker`s melanosis

Smoker`s melanosis is the brown to blackish discoloration of the aerodigestive tract mucosa in the oropharynx, laryngopharynx, and esophagus. Although an isolated lesion of the aerodigestive tract is extremely rare, determining the malignant potential of pigmented lesions is challenging. The current dilemma is whether to pursue tissue diagnosis or close clinical observation with endoscopic surveillance; hence, clinical studies with a large number of cases are required to determine high-risk endoscopic features of such lesions (1,2).

Informed Consent: Written informed consent obtained from the patient who participated in this study.

Peer-review: Externally peer-reviewed.

Author contributions: Concept - K.C.; Design - K.C.; Supervision - M.R.; Resource - M.R.; Materials - K.C.; Data Collection and/or Processing -

K.C.; Analysis and/or Interpretation - M.R.; Literature Search - K.C.; Writing - K.C.; Critical Reviews - M.R.

Conflict of Interest: No conflict of interest was declared by the authors.

Financial Disclosure: The authors declared that this study has received no financial support.

ORCID ID: Kinesh Changela: 0000-0001-9139-8736

REFERENCES

1. Yokoyama A, Omori T, Yokoyama T, et al. Esophageal melanosis, an endoscopic finding associated with squamous cell neoplasms of the upper aerodigestive tract, and inactive aldehyde dehydrogenase-2 in alcoholic Japanese men. *J Gastroenterol* 2005; 40: 676-84. [\[CrossRef\]](#)
2. Yokoyama A, Mizukami T, Omori T, et al. Melanosis and squamous cell neoplasms of the upper aerodigestive tract in Japanese alcoholic men. *Cancer Sci* 2006; 97: 905-11. [\[CrossRef\]](#)