INTRODUCTION

A previously healthy 81-year-old man was admitted to our hospital with weakness and fatigue caused by anemia. Laboratory studies were notable for a red-cell count of 1,580,000 per ml, a hemoglobin level of 4.8 g per deciliter, and hematocrit level of 15.1 %. Emergency endoscopic examination revealed an active gastric ulcer (Panel A).

Two days later, mild epigastric tenderness was present. Computed tomography of the abdomen revealed hepatic portal venous gas and massive gastric submucosal hematoma (Panel B); however, there was no evidence of perforation. Four days after conservative treatment, on follow-up computed tomography, neither gastric submucosal hematoma nor hepatic portal venous gas was observed (Panel C). Recovery was uneventful and the patient was well discharged on the 20th hospital day.