Zenker’s Diverticulum

Causes

Zenker’s diverticulum is a pouch in the upper esophagus that develops slowly over time, probably years to decades. It is most commonly found in patients in their 70’s or 80’s. The diverticulum occurs in between muscle attachments of the pharyngeal constrictors and a circumferential muscle at the top of the esophagus called the cricopharyngeus (CP). Together these muscles form the upper esophageal sphincter.

The cricopharyngeus should be tight most of the time, however, with a swallow it should open briefly. Sometimes, likely with age, this coordination doesn’t work as well and the cricopharyngeus muscle stays tight, narrowing the opening. Some think this develops after a lifetime of reflux or other dysphagia problems.

Symptoms, Signs, and Diagnosis

Patients with Zenker’s diverticulum will have difficulty with swallowing and may have symptoms of food regurgitation. Other symptoms include cough, throat clearing, and voice changes. In extreme instances, patients can develop weight loss, aspiration pneumonia and require hospitalization.

The diagnosis is usually made on a barium esophagram, a videofluoroscopic exam performed in radiology, or esophageal endoscopy.

Treatment

Treatment for Zenker’s diverticulum is surgical. This can be performed either through an incision in the neck (open surgery) or through the mouth using either a laser or stapler, or both (endoscopic surgery). There is also a newer flexible endoscopic method which would be particularly useful in patients with challenging anatomy (limited neck flexion, limited jaw opening etc.); however, there is limited outcome data (results and complications) at this time for this approach.