Abstract
Purpose: To highlight and discuss the clinical presentation of Killian-Jamieson’s diverticulum
Design and method of study and analysis: Case report and literature review
Summary of results: An adult female presented with five months of neck pain and swelling. Imaging of her neck demonstrated what appeared to be a 5 cm Zenker’s diverticulum. She underwent hypopharyngoscopy and esophagoscopy which was negative for a Zenker’s diverticulum but showed a cervical esophageal diverticulum of Killian-Jamieson’s triangle.
Conclusions: Killian-Jamieson’s diverticulum is a rare entity, radiologically similar to a Zenker’s diverticulum but with a different clinical presentation and fewer treatment options.

Introduction
The transition from inferior constrictor to cricopharyngeal muscle presents an anatomical vulnerability- Killian’s dehiscence- through which diverticula commonly form. The most frequent type, the Zenker’s diverticulum originates between the thyropharyngeal and cricopharyngeal muscles. A second vulnerability- Killian-Jamieson’s dehiscence- between the cricopharyngeus muscle and the esophagus has been described, but diverticula here are rare. In Killian-Jamieson’s triangle only a singular layer of circular muscle fibers form the posterior esophageal wall, making it thin and vulnerable to diverticulum formation.

Case Presentation
A 44 year old female presented with a five month history of neck pain and swelling. Computed tomography of the neck and barium swallow demonstrated what appeared to be a five centimeter Zenker’s diverticulum (Figures 1 and 2).

She denied dysphagia, regurgitation of undigested food, weight loss, or Broyle’s sign. Because of the unusual clinical presentation, the patient was taken to the operating room where hypopharyngoscopy and esophagoscopy was performed which showed no evidence of a Zenker’s diverticulum but a cervical esophageal diverticulum emanating through Killian-Jamieson’s triangle, immediately below the cricopharyngeus muscle (Figure 3). The bar interpreted on esophagram as consistent with the cricopharyngeus muscle was actually the hypertrophied lip of the diverticulum. Only a handful of prior cases of a Killian-Jamieson’s diverticulum have been reported.

References
Kumoi K, Ohtsuki N, Teramoto Y. Pharyngo-esophageal diverticulum arising from Laimer’s triangle. Ear Arch Oto 2010; 208: 184-187