

Unexpected bowel obstruction after the treatment of gastric varices

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Abstract

As a complication of GV treatment with Histoacryl®[®], bowel obstruction is not common. However, when the patients with a history of abdominal surgery complain of an abdominal pain after the GV treatment, we should also consider bowel obstruction.

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Key Clinical Meeage

As a complication of GV treatment with Histoacryl®[®], ileus is not common. However, when the patients with a history of abdominal surgery complain of an abdominal pain after the GV treatment, we should also consider ileus.

Question

A 66-year-old man with decompensated alcoholic cirrhosis presented with abdominal pain. He had a history of an appendectomy 23 years previously. He underwent endoscopic injection sclerotherapy (EIS) using N-butyl-2-cyanoacrylate (Histoacryl®[®]) for gastric varices (GV) 1 month previously (Figure 1). Physical examination was normal. Abdominal X-ray revealed small intestinal gas with niveau and a 3-cm, high-density structure in the pelvic cavity (Figure 2). What is the diagnosis and cause?

Answer

The structure was found in the GV after EIS treatment. We believe that the small intestine obstruction resulted from a part of the polymer falling out of the GV after EIS treatment. Bowel obstruction was treated conservatively and, the polymer was excreted naturally from the intestine. GV, detected using endoscopy, are found in 20% of patients with cirrhosis portal hypertension. Treatment for GV using Histoacryl®[®] was first reported in 1986¹, and it became the first-line management option of GV due to its rapid hardening quality in the blood². After sclerotherapy, solidified Histoacryl®[®] may be frequently extruded as a polymer

into the lumen². There are no previous reports of bowel obstruction caused by the polymer after EIS using Histoacryl®; however, it is possible that the extruded polymer caused the obstruction.

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Conflict of interest statement

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Author's contributions

Ryo Yamauchi designed the study, collected data, and drafted the manuscript.

Kazuhide Takata designed the study and collected data.

Fumihito Hirai approved the article.

All authors critically revised the manuscript, approved the final version to be published, and agree to be accountable for all aspects of the work.

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Figure Legends

Figure 1.

Endoscopic findings of endoscopic injection sclerotherapy treatment with Histoacryl® for gastric varices.

Figure 2.

Abdominal X-ray showing small intestinal gas with niveau and a 3-cm, high-density structure in the pelvic cavity.



