

Migration of a vascular coil from the common bile duct secondary to vasculobiliary injury after cholecystectomy

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Submitted Aug 12, 2019. Accepted for publication Aug 22, 2019.

doi: 10.21037/hbsn.2019.09.19

View this article at: <http://dx.doi.org/10.21037/hbsn.2019.09.19>

A 61-year-old woman had cholangitis secondary to two cholelithiasis [one in the common bile duct (CBD) and one in the cystic duct (Mirizzi syndrome)], which was treated by antibiotics. The patient subsequently underwent a sphincterotomy with endoscopic retrograde cholangiopancreatography (ERCP) and, finally, a cholecystectomy by coelioscopy. The postoperative course was marked by biliary leakage. She was transferred to our hospital due to haemorrhagic shock and abdominal pain.

An abdominal computed tomography (CT) showed a large subhepatic haematoma with active bleeding of the right hepatic artery. Embolisation of the right hepatic artery and an explorative laparotomy were performed. Magnetic resonance imaging of the liver and ERCP confirmed injury to the CBD, in which a covered biliary stent was placed. After 3 months, abdominal CT showed migration of the coil in the CBD. An ERCP was performed to extract the biliary stent and confirmed the migration of this vascular coil (*Figure 1*).

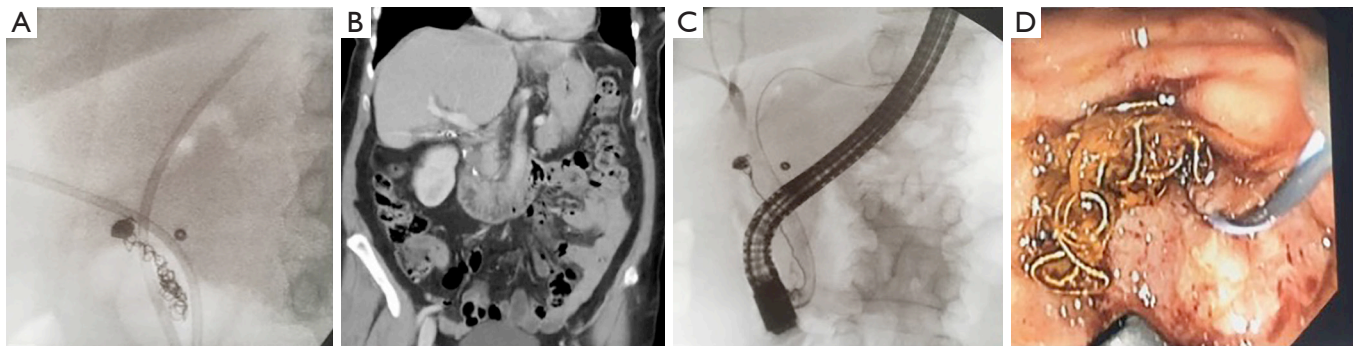


Figure 1 Radiography and CT scan showing migrated vascular coils into the common bile duct before biliary stent removal (A,B). Cholangiogram and endoscopy showing migrated vascular coils into the common bile duct after biliary stent removal (C,D).

Acknowledgments

None.

Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Written informed consent was obtained from the patient for publication of this manuscript and any accompanying images.

Cite this article as: Taibi A, Legros R. Migration of a vascular coil from the common bile duct secondary to vasculobiliary injury after cholecystectomy. *Hepatobiliary Surg Nutr* 2019;8(6):679-680. doi: 10.21037/hbsn.2019.09.19