

Endoscopic Treatment for Anastomotic Varices after Choledochojejunostomy

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Introduction

Ectopic varices are defined as portosystemic venous collaterals occurring anywhere in the gastrointestinal tract other than the esophagogastric region. Anastomotic varices after choledochojejunostomy should be considered when evaluating gastrointestinal hemorrhage in patients with previous surgery and mesenteric venous hypertension. Hemorrhaging from varices in the jejunal loop [1], with extrahepatic portal vein obstruction after choledochojejunostomy, is a rare condition but several articles have been published. Various medical treatments, such as interventional radiology and surgery, have been used to control bleeding from anastomotic varices after choledochojejunostomy; however, there is no best treatment strategy for anastomotic varices. Anastomotic varices after choledochojejunostomy drain directly into the intrahepatic portal vein. Therefore, endoscopic treatment is difficult for this condition and endoscopic oblitative therapy with N-butyl-2-cyanoacrylate is the preferred treatment for this type varices [1,2].

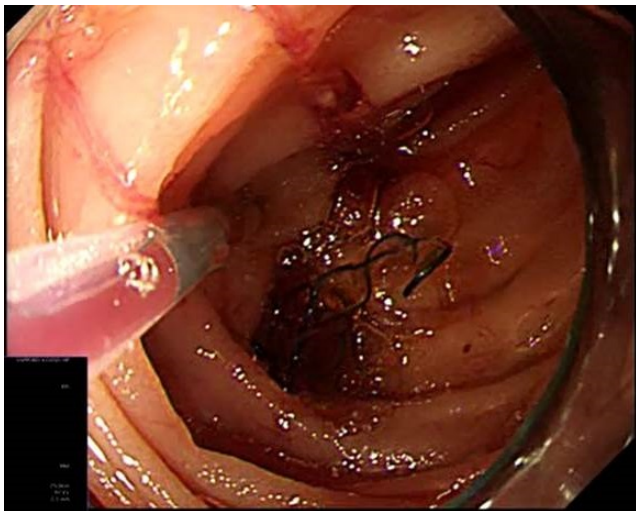


Figure 1a: Endoscopic oblitative therapy with N-butyl-2-cyanoacrylate for anastomotic varices (case 1).

Endoscopic oblitative therapy was successfully performed for two anastomotic variceal patients after choledochojejunostomy with a high concentration of N-butyl-2-cyanoacrylate (Histoacryl [2], B.Braun Dexon GmbH Spangenberg, Germany) (Figures 1a-2b).



Figure 1b: Fluoroscopic observation with an infusion of n-butyl-2-cyanoacrylate to determine the extent of the varices (case 1).

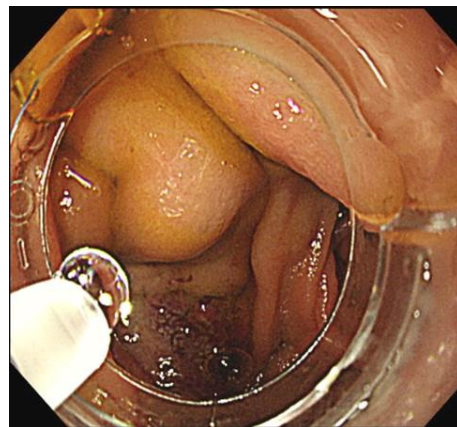


Figure 2a: Endoscopy revealed large, coil-shaped varices in the afferent jejunal loop (case 2).

For endoscopic oblitative therapy of anastomotic varices, we used N-butyl-2-cyanoacrylate diluted to a final concentration of 83% in 5% Lipiodol (Guerbert, Roissy, France). Lipiodol prevents the tissue adhesive from polymerizing too quickly and also allows for radiographic monitoring.

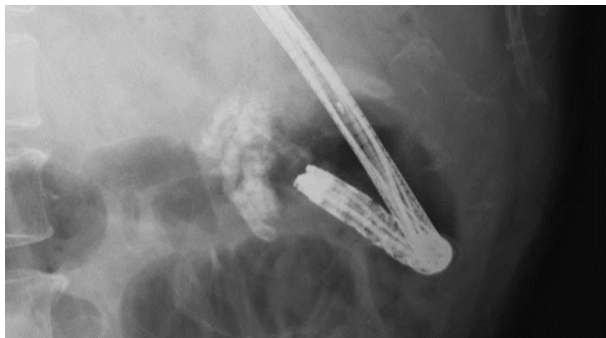


Figure 2b: Fluoroscopic findings of endoscopic obliteration therapy with N butyl-2-cyanoacrylate for anastomotic varices (case 2).

Endoscopic obliteration therapy with a high concentration of N-butyl-2-cyanoacrylate is useful for patients with anastomotic varices after choledochojejunostomy.

References

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2. Deepak KB, Sharma BC, Sriram PVJ (1999) Endoscopic management of bleeding ectopic varices with Histoacryl. *HBP Surg* 11: 171-173.