Electrocoagulation of biliary papillomatosis during choledochoscopy

A 39-year-old woman was admitted to our hospital with pain in the right upper quadrant for more than 2 months. Magnetic resonance imaging (MRI) showed that the patient had liver calcification, dilatation of the intrahepatic bile duct and upper part of the extrahepatic bile duct, and hepatic parenchymal nodules (► **Fig. 1**). The patient had undergone cholecystectomy for gallstones a year previously. For further diagnosis and treatment, we decided to perform biliary exploration.

During the procedure, there were no obvious stones seen but many papillary neoplasms with silt-like mucus were seen in the hilar and intrahepatic bile ducts on choledochoscopy (► **Fig. 2**), which were thought to be biliary papillomatosis [1]. A biopsy was taken, which confirmed the diagnosis (► **Fig. 3**). Biliary papillomatosis is a rare and fatal disease characterized by multiple papillary tumors of variable distribution and extent in the intrahepatic and/or extrahepatic biliary tree [2, 3]. In an effort to destroy the tumors, 6 weeks later, we performed cholangioscopic electrocoagulation through a T-tube tract (► **Video 1**). With there being little bleeding during the endoscopic operation, we re-inserted a T-tube into the common bile duct, and the patient returned to the ward safely.

Planned follow-up of the patient by choledochoscopy 3 weeks later showed that the visible bile duct silt-like mucus had disappeared, the hilar and intrahepatic bile ducts were smooth with some scarring visible, but there was no evidence of bile duct papilloma (► **Fig. 4**). The patient was discharged from the hospital after a period of time.

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► **Fig. 1** Magnetic resonance image showing dilatation of the bile ducts and hepatic parenchymal nodules.

► **Fig. 2** Choledochoscopy view showing papillary neoplasms in the intrahepatic bile duct.

► **Fig. 3** Histology of the biopsy specimen showing biliary papillomatosis.

▶ **Video 1** Cholangioscopy showing many papillary neoplasms in the hilar and intrahepatic bile ducts. Cholangioscopic electrocoagulation is performed in an effort to destroy the tumors. Follow-up choledochoscopy shows the procedure was a success.

▶ **Fig. 4** Choledochoscopy view showing that the hilar and intrahepatic bile ducts were smooth although with some scarring.

Competing interests

None

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