Transfer of a lumen-apposing metal stent to a different fistula for endoscopic necrosectomy of walled-off pancreatic necrosis

A 54-year-old man underwent multiple rounds of endoscopic necrosectomy via a 15-mm-diameter lumen-apposing metal stent (LAMS) (Hot AXIOS; Boston Scientific, Marlborough, MA, USA) in the gastric body for a large walled-off pancreatic necrosis (WON); however, infectious WON remained (▶Fig. 1). Endoscopic ultrasound-guided transmural drainage with a plastic stent through the antrum was performed. Because of the unstable position of the echoendoscope, a LAMS was not used. Endoscopic necrosectomy was attempted 6 days later, but scope insertion through the antrum fistula was difficult. Thus, we attempted to transfer the LAMS from the gastric body to the antrum fistula. The distal flange of the LAMS removed from the gastric body was grasped with 20-mm snare forceps through one channel of a two-channel endoscope. The manually compressed proximal flange was retrogradely inserted into the other channel (▶Fig. 2). The scope was inserted into the WON, and the distal flange was released into the cavity first. Next, the scope was gradually withdrawn, and an attempt was made to push the LAMS using forceps to release the proximal flange into the gastric lumen. However, the proximal flange was unintentionally released into the WON. A conventional endoscope was then inserted into the WON, and the proximal flange was successfully withdrawn into the gastric lumen by grasping the proximal flange with forceps. The LAMS placement facilitated smooth scope insertion into the WON. Finally, for fistula maintenance, the plastic stent removed from the antrum fistula was redeployed to the body fistula (▶Fig. 3, ▶Video 1).

Although the removal and replacement of the same LAMS have been reported recently [1–3], there have been no reports of LAMS transfer to another fistula for endoscopic necrosectomy. This case...
suggests that endoscopic necrosectomy from multiple fistulas with a single LAMS is possible by transferring the LAMS to another fistula with placement of a plastic stent.

Competing interests

The authors declare that they have no conflict of interest.

The authors

Koichiro Mandai, Tetsuhisa Ko, Koji Uno, Kenjiro Yasuda
Department of Gastroenterology, Kyoto Second Red Cross Hospital, Kyoto, Japan

Corresponding author

Koichiro Mandai, MD
Department of Gastroenterology, Kyoto Second Red Cross Hospital, 355-5 Haruobicho, Kamiyoku, Kyoto 602-8026, Japan
mndkchr@gmail.com

References


Bibliography

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Video 1 Deployment of a lumen-apposing metal stent to a different fistula using a two-channel endoscope.