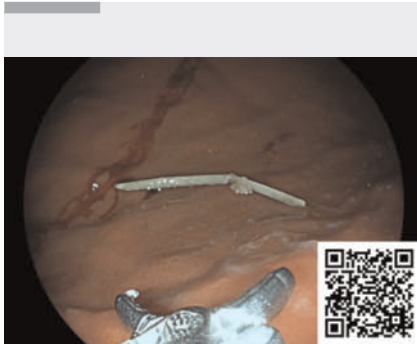


Extraction of a perigastric foreign body using a lumen-apposing metal stent

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▶ **Video 1** Extraction of a perigastric foreign body using a lumen-apposing metal stent.



▶ **Fig. 1** Initial CT scan showing an antral perigastric collection measuring 4 cm in diameter and containing a hyperdense linear image suggestive of a bone or fishbone foreign body.



▶ **Fig. 2** Upper gastrointestinal endoscopy showing a bulging collection in the prepyloric antrum.

Lumen-apposing metal stents (LAMS) were initially developed to drain perigastric pancreatic necrotic collections and perform endoscopic necrosectomy.

We report the case of a man hospitalized for a 4-cm infected antral perigastric collection secondary to a fishbone that had perforated the gastric antrum (▶ **Fig. 1**, ▶ **Video 1**). Upper gastrointestinal endoscopy showed a bulging collection in the prepyloric antrum (▶ **Fig. 2**). Given the location of the collection, its size, and the presence of a foreign body within it, we first performed endoscopic cystogastrostomy using a 15×15 mm LAMS (▶ **Fig. 3**). A second upper gastrointestinal endoscopy was performed 7 days later to extract the fishbone through the LAMS (▶ **Fig. 4**). The procedure was successful. No complication occurred.

This endoscopic minimally invasive approach avoided surgery, and the patient was discharged from hospital the day after the fishbone extraction. The 6-month follow-up period was uneventful.

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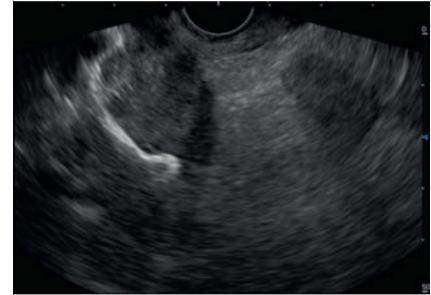
Conflict of Interest

A. Belle is a consultant for Boston Scientific. M. Barret is a consultant for Olympus, Fujifilm, and Medtronic. S. Chaussade is a consultant for Fujifilm. F. Corre, M. Carpentier-Pourquier, J. Leroux, and R. Coriat declare that they have no conflict of interest.

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▶ **Fig. 3** Cystogastrostomy using a 15×15 mm lumen-apposing metal stent (LAMS).



▶ **Fig. 4** Fishbone extraction through the LAMS using foreign-body forceps.

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Endoscopy 2024; 56: E432
DOI 10.1055/a-2318-2761
ISSN 0013-726X
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Georg Thieme Verlag KG, Rüdigerstraße 14, 70469 Stuttgart, Germany

