Endoscopic introduction of an over-the-scope clip through an overtube to close a gastrocutaneous fistula in a patient with a complex upper esophageal stenosis

A 51-year-old man with a history of laryngeal cancer requiring total laryngectomy and placement of a forearm skin graft into the hypopharynx developed a nonhealing gastrocutaneous fistula after removal of a gastrostomy tube (Fig. 1a). The injection of indigo carmine through the skin made it possible to determine the precise location of the 3- to 4-mm-diameter gastrocutaneous fistula within thickened gastric folds (Fig. 1b). A gastroscope could be passed into the stomach after an esophageal stenosis between the hypopharynx and upper esophageal sphincter, induced by radiation fibrosis and the presence of a forearm skin graft, had been dilated sequentially with 9-, 10-, and 12-mm Savary bougies; however, it was still not possible to pass the fistula-closing device, an over-the-scope clip (OTSC System; Ovesco Endoscopy, Tübingen, Germany), through the hypopharynx. Contrast esophagography after the dilation procedure did not show any endoluminal esophageal damage, so an overtube (Guardus overtube-esophageal; inner diameter 16.7 mm, outer diameter 19.9 mm; US Endoscopy, Mentor, Ohio, USA) was inserted into the esophagus. The large-diameter overtube served as a “giant working channel,” allowing smooth passage of the scope with a large fistula-closing device, such as the OTSC System.

In summary, an impossible situation was converted into a therapeutic solution by combining the use of techniques and equipment widely available in the endoscopy suite, such as fluoroscopy, overtubes, dilation balloons, clipping devices, and chromoendoscopy.

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Fig. 1  a Gastrocutaneous fistula in a 51-year-old man, which developed after the removal of a gastrostomy tube. b The fistula was found between the gastric folds by injecting indigo carmine through the opening in the skin. c The presence of an overtube allowed passage of the scope loaded with the over-the-scope clip (OTSC). The overtube functioned as a giant working channel. d The OTSC was successfully deployed over the fistula, which closed immediately.

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