A challenging case of giant biliary stones in a patient with situs inversus totalis: conventional ERCP combined with intraductal cholangioscopy and laser lithotripsy

A 65-year-old man with situs inversus was admitted with jaundice, nausea, and upper abdominal pain. A computed tomography scan confirmed the diagnosis of situs inversus totalis and revealed a large stone in the main bile duct with distal stenosis.

The patient and endoscopist were positioned in the usual manner during endoscopic retrograde cholangiopancreatography (ERCP). As a result of the anatomical abnormality, the duodenoscope was rotated through 180° in D2 to enable visualization of the ampulla. After wire-guided cannulation, fluoroscopy showed two giant stones (23 mm each) in the main bile duct. Mechanical lithotripsy was attempted but was unsuccessful. Three days later, intraductal cholangioscopy using the SpyGlass DS system (Boston Scientific Inc., Marlborough, Massachusetts, USA) and laser lithotripsy were performed successfully. A fully covered, biliary, self-expandable metal stent was placed (Video 1) across the stenosis in the distal bile duct. Fragmentation of the large stones was noted, and the patient was asymptomatic 6 weeks later.

This is the first case report of a patient with complete situs inversus where ERCP, SpyGlass, and laser lithotripsy were used successfully. We wish to highlight that the endoscopist–patient orientation in this case was the same as that adopted in conventional ERCP in patients without anatomical anomalies. Some case reports of successful ERCP in patients with situs inversus have involved modification to the conventional technique [1]. These modifications include changes to the position of the patient prior to or during the procedure, or a different position for the physician, such as the “mirror” technique [2, 3]. Our impression is that the changes to the classical ERCP techniques are not necessary in patients with situs inversus.

Video 1 Endoscopic approach in situs in versus.

Competing interests
None

The Authors
Félix I. Téllez-Ávila, Sandeep Pattel, Gilberto Duarte-Medrano, Marlon Seenath, David R. Herrera-Mora, Gustavo Lopez-Arce
Department of Endoscopy, Instituto Nacional de Ciencias Médicas y Nutrición Salvador Zubirán, Avenida Vasco de Quiroga No. 15, Colonia Belisario Domínguez Sección XVI, Delegación Tlalpan C.P. 14080, Ciudad de México, México
Fax: +52-55-54870900
felixtelleza@gmail.com

Corresponding author
Félix I. Téllez-Ávila, MD, PhD
Endoscopy Department, Instituto Nacional de Ciencias Médicas y Nutrición Salvador Zubirán, Avenida Vasco de Quiroga No. 15, Colonia Belisario Domínguez Sección XVI, Delegación Tlalpan C.P. 14080, Ciudad de México, México
Fax: +52-55-54870900
felixtelleza@gmail.com

E248

Téllez-Ávila Félix et al. SpyGlass in situs inversus... Endoscopy 2017; 49: E248–E249

This document was downloaded for personal use only. Unauthorized distribution is strictly prohibited.
References


Bibliography

DOI https://doi.org/10.1055/s-0043-115106
Published online: 18.7.2017
Endoscopy 2017; 49: E248–E249
© Georg Thieme Verlag KG
Stuttgart - New York
ISSN 0013-726X

ENDOSCOPY E-VIDEOS
https://eref.thieme.de/e-videos

Endoscopy E-Videos is a free access online section, reporting on interesting cases and new techniques in gastroenterological endoscopy. All papers include a high quality video and all contributions are freely accessible online.

This section has its own submission website at https://mc.manuscriptcentral.com/e-videos