

Self-Knotting of Feeding Tube

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Figure 1 A patient who underwent a three-stage esophagectomy for carcinoma of the esophagus experienced the complications of left vocal cord palsy and choking on swallowing. A feeding tube (2-mm radioopaque PVC tubing, Portex Limited, England) was inserted via endoscopic guidance for nutrition. Upon removal of the tube, we experienced some resistance and the patient complained of retrosternal discomfort. A chest radiograph demonstrated that the tube had become knotted inside the intrathoracic stomach.

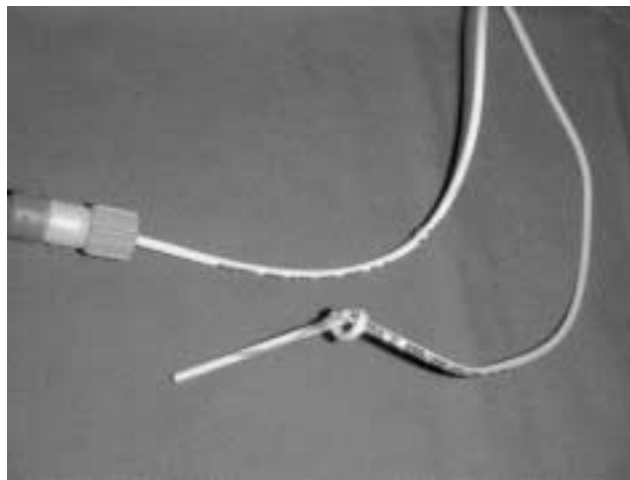


Figure 2 Esophagogastrroduodenoscopy showed a mild anastomotic stricture which required gentle dilation before successful removal of the tube.