Intestinal bowel perforation and bacterial peritonitis secondary to migrated biliary and pancreatic stents

Case report

Intestinal bowel perforation by migrated biliary or pancreatic stent is a rare complication that can occur anywhere in the gastrointestinal tract [1–5]. We report two patients with intestinal perforation and bacterial peritonitis secondary to a migrated stent from the common bile duct and pancreatic duct.

A 43-year-old male with chronic pancreatitis, who underwent an endoscopic cystogastrostomy for a pseudocyst and pancreatic stent placement of the pancreatic duct after endoscopic retrograde cholangiopancreatography (ERCP) with biliary stenting for obstructive cholangitis, was transferred to our institution for treatment of bacterial peritonitis with Citrobacter sp. On admission he was febrile, hypotensive, and had a painful distended abdomen. Blood test revealed leukocytosis and cholestasis. Abdominal computed tomography (CT) scan showed ascites, intra-abdominal free air, and pancreatic calcifications.

Fig. 1 Curved multiplanar reforma­tion CT image showing a pancreatic stent perforating the duodenum, ascities, intra-abdominal free air, and pancreatic calcifications.

Fig. 2 Abdominal CT showing biliary stent perforating the ileum and ascites.

Fig. 3 Curved multiplanar reforma­tion CT image showing distal end of the biliary stent perforating the ileal wall.

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