Removal of an embedded gastric fishbone by traction-assisted endoscopic full-thickness resection

A 65-year-old man was referred to our hospital with a half-year history of upper abdominal pain. Endoscopy showed a submucosal eminence on the anterior wall of the gastric antrum (▶Fig. 1a). Endoscopic ultrasonography (EUS) revealed a hyperechoic lesion in the gastric submucosa (▶Fig. 2). A computed tomography (CT) scan showed a long, high density shadow in the gastric antrum, locally protruding into the serosal cavity (▶Fig. 3). Emergency endoscopy was performed with the patient under general anesthesia and with endotracheal intubation (▶Video 1). The mucosa of the gastric antrum was circumferentially incised, exposing one side of the fishbone (▶Fig. 1b). Attempts to extract it using foreign body forceps were unsuccessful, indicating significant adhesion with the surrounding tissues (▶Fig. 1c). Snare traction was then employed (▶Fig. 1d). Subsequently, we performed traction-assisted endoscopic full-thickness resection (ETFR), revealing that the base of the fishbone was enveloped within the omentum (▶Fig. 1e). After the adhesions had been dissected, a 2.5-cm long fishbone was successfully extracted (▶Fig. 4) and the perforation was immediately closed with several metal clips (▶Fig. 1f). The operative and postoperative periods were uneventful, without any complications. A fishbone invading the intrinsic muscularis and serosa of the gastric wall is rare [1]. Removal is often more challenging when there has been prolonged penetration of the gastric wall, and the risk of complications increases [2, 3]. We performed traction using a snare combined with endoclips to assist in ETFR to successfully remove the fishbone. In this case, laparoscopic and open surgery were avoided.

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Conflict of Interest

The authors declare that they have no conflict of interest.

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Video 1 Removal of an embedded gastric fishbone by traction-assisted endoscopic full-thickness resection.

Fig. 3 Computed tomography images showing the location and depth of the fishbone (red arrow) on: a transverse plane; b coronal plane.

Fig. 4 Photograph of the extracted fishbone.

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