A large impacted pancreatic duct stone causing acute cholangitis

A 67-year-old woman with diabetes presented with persistent pain in the right upper quadrant radiating through to her back. Later, she developed a high fever and jaundice. On examination, her epigastrium was soft with mild tenderness but no signs of peritonitis. Abdominal ultrasonography showed a 13-cm round hyperchoic lesion with an acoustic shadow at the distal end of the common bile duct, which was dilated, but no evidence of stones in the gallbladder. Endoscopic retrograde cholangiopancreatography (ERCP) revealed a bulging ampulla with whitish material at the opening of the ampulla, which was blocked by a stone.

Endoscopic views showing:

- Fig. 1: Endoscopic views showing a whitish material impacted at the ampullary orifice.
- Fig. 2: Contrast injection beyond the impacted stone revealed multiple filling defects in the pancreatic duct without any filling defects in the bile duct another evidence of a stone being pushed out by the contrast injection.
- Fig. 3: Endoscopic views showing:
  - a: the oval-shaped white stone that was initially pushed out by the contrast injection.
  - b: multiple residual pancreatic duct stones that were removed using an extraction balloon.

Video 1: Endoscopic view of the bulging ampulla and whitish impacted material of the precut sphincterotomy being performed and the large white stone being pushed out by the contrast injection.

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DUCT STONE is a whitish stone that is impacted at the lower part of a bulging ampulla.

**Competing interests:** None

**References**


**Bibliography**

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