Successful endoscopic treatment using biological fibrin glue (Tissucol) for an enterocutaneous fistula occurring after cephalic duodenopancreatectomy

An enterocutaneous fistula is an abnormal communication between the small or large bowel and the skin, which leads to external drainage of intestinal contents. It is an important issue in surgical practice, as most cases occur secondary to surgical complications and cause significant mortality and morbidity owing to septic complications and cause significant morbidity.

The patient would not accept more surgical intervention, and we therefore opted for a biological fibrin glue. Gastrointest Endosc 2002; 34: 632–638

A colonoscopy was performed, during which a guidewire was introduced through the fistula and visualized in the transverse colon. Initially we attempted to close the defect with the over-the-scope clip (OTSC) system (Ovesco, Tübingen, Germany); however, because of the existence of fibrosis around the orifice, this was not successful. We therefore proceeded to debride the orifice and to seal the fistula with Tissucol immediately after the procedure; complete closure was achieved following this procedure.

Complete closure was achieved following one treatment session, hence we believe that this procedure could be useful in patients who are considered high risk for surgery and who have an enterocutaneous fistula that is accessible on endoscopy.

Endoscopy_UCTN_Code_TTT_1AQ_2AG

Competing interests: None

Ángeles Araujo-Míguez, Salvador Sobrino-Rodríguez, Ansel David Avila-Carpio, Juan Manuel Bozada-García, Teófilo López-Ruiz, Juan Caballero-García, José Luis Márquez-Galán

Digestive CMU, Virgen del Rocio University Hospitals, Seville, Spain

References

Bibliography
Endoscopy 2015; 47: E191
© Georg Thieme Verlag KG Stuttgart · New York
ISSN 0013-726X

Corresponding author
Ángeles Araujo-Míguez, MD
Digestive CMU, Virgen del Rocio University Hospitals
C/ Manuel Siurot s/n
Seville 41013
Spain
Fax: +34-95-5012439
angaramig@gmail.com