A 71-year-old woman was admitted to our hospital because of vomiting blood, and an endoscopic examination revealed ruptured gastric varices (Fig. 1). Endoscopic injection sclerotherapy was carried out by injecting a total of 2 mL of sclerosant (a mixture of 1 mL of cyanoacrylate and the same amount of lipiodol) into the varices (Fig. 2), and endoscopic hemostasis was achieved (Fig. 3). Immediately after the procedure, the patient complained of left upper quadrant pain, and she was treated with an analgesic. Radiograph and computed tomography (Fig. 4 a, b) revealed a high-density area around the left diaphragm, and we made a diagnosis of extravasation of the sclerosant following sclerotherapy. The symptoms resolved 1 day after the procedure. Only one previous report has focused on extravasation following sclerotherapy for bleeding gastric varices. Cheng et al. reported a case of intraperitoneal sclerosant leakage after sclerotherapy with a 3 mL mixture of cyanoacrylate and lipiodol [1]. Sclerosant extravasation following sclerotherapy for gastric varices is a very rare but serious complication.

References
1 Cheng HC, Cheng PN, Tsai YM et al. Sclerosant extravasation as a complication of sclerosing endotheraphy for bleeding gastric varices. Endoscopy 2004; 36: 239 - 241

Endoscopy_UCTN_Code_CPL_1AH_2AC

Gastroenterology Division, Yokohama City University School of Medicine, Japan

Bibliography
Endoscopy 2007; 39: E242
© Georg Thieme Verlag KG Stuttgart · New York · ISSN 0013-726X

Corresponding author
M. Inamori, MD
Gastroenterology Division
Yokohama City University School of Medicine
3-9 Fukaura
Kanazawa-ku
Yokohama 236-0004
Japan
Fax: +81-45-784-3546
Email: inamorim@med.yokohama-cu.ac.jp

Fig. 1 Bleeding from gastric varices was revealed.

Fig. 2 Endoscopic injection sclerotherapy was carried out.

Fig. 3 Endoscopic hemostasis was successful.

Fig. 4 a, b A computed tomography scan revealed a high-density area around the left diaphragm.