A 65-year-old man presented to hospital with complaints of appetite loss and abdominal pain. Abdominal computed tomography demonstrated a tumor of the gallbladder and dilatation of intrahepatic bile ducts. Although he was not jaundiced, he was suspected to have a malignant hilar biliary stricture, and percutaneous transhepatic cholangiography was performed on the right lobe of the liver with placement of a drainage catheter (Fig. 1). Cytological examination of the bile revealed adenocarcinoma. Unfortunately, 5 days after the catheter was placed it was accidentally removed and the patient was referred to our hospital. Abdominal computed tomography and magnetic resonance imaging showed thickening of the gallbladder wall (arrows) and a large subcapsular biloma (arrowheads) anterior and posterior to the right lobe of the liver. Biloma, defined as an encapsulated collection of bile outwith the biliary tree, occurs secondary to traumatic or iatrogenic injury in most cases [2]. It has been reported that bilomas can be treated by percutaneous catheter drainage and/or endoprosthesis placement [3,4]. Particularly useful in patients with malignant biliary obstruction, the deployment of metallic biliary stents can also facilitate closure of the intrahepatic biliary duct injury that caused the biloma.
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References

Fig. 4a Endoscopic retrograde cholangiography showed a type IIIa hilar biliary stricture. b Three Jo-Stent SelfIX stents were placed. These stents were deployed in the left intrahepatic bile duct, the right posterior branch, and the right anterior branch, in a three-branched configuration.

Fig. 5 Abdominal computed tomography showed complete resolution of the biloma on day 23 after the stents were placed.

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Bibliography
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