Porto-gastric fistula from penetration of coil from gastric varix after TIPS procedure for bleeding gastric varices

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Abbreviations: TIPS, tranjugular intrahepatic portosystemic shunt

A 62 year old male with portal hypertension secondary to Hepatitis C cirrhosis underwent an urgent tranjugular intrahepatic portosystemic shunt (TIPS) procedure for uncontrolled upper gastrointestinal bleeding secondary to gastric varices (GOV2). TIPS procedure revealed drainage into the gastroduodenal variceal bed from the left portal vein and spleen vein. Three coils in total were deployed after identification of a large gastric varix, and placement of TIPS was successful. Patient tolerated the procedure well, there were no immediate complications, and bleeding control was achieved.

The patient underwent follow-up endoscopy after two weeks which revealed a large non-bleeding gastric varix in the fundus, with one of the coils knuckled over the most distal varix as shown in the picture.

other case report of this occurrence.¹ Trans-gastric endovascular coil penetration has also been reported from other procedures.^{2,3} Although unknown, the mechanism of penetration is likely related to inflammation and fistula formation into the gastric lumen. As the coil had penetrated a gastric varix in a patient with portal hypertension, we chose not to manipulate the coil to prevent further complications. Future management of this should aim on optimization of further medical therapy as to prevent recurrent gastric variceal bleeding.

References

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Penetration of coil into gastric varix is an extremely rare complication of variceal embolization. There has been one only one

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