Too bitter to swallow – peroperative conundrum

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Many a time a surgeon is stuck in a peroperative conundrum and that makes the field of surgery interesting.

A 60-year-old gentle man underwent capsule endoscopy for investigation of chronic lower GI bleed. Capsule endoscopy has been a revolutionary concept wherein a small capsule with an inbuilt camera that transmits images from within the bowel is swallowed. The swallowed capsule traverses the entire GI tract clicking images at regular intervals. A simulated image rebuilding in a three dimensional format is undertaken and this may diagnose lesions in the GI tract.

Fig. 1 Locating the capsule

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Fig. 2 Enteroscopy

Fig. 3 X-ray with capsule endoscopy

Fig. 4 Enterotomy

Having read about this in the media, this patient chose to have capsule endoscopy, basically to avoid endoscopic studies. However, the capsule got stuck in its path because he had crohn's disease with strictures (Fig. 1).

After due discussion, it was decided to undertake a laparotomy. An intraoperative enteroscopy showed mul-

Fig. 5 Capsule retrieved

tipple small bowel strictures (Fig. 2). The capsule was traced to its point of impaction (Fig. 3) and was delivered through an enterotomy (Figs. 4 and 5). The postoperative period was eventful. When he was discharged he requested us not to prescribe him any capsule to be swallowed!!