

Malpositioning of Hot AXIOS

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Presentation

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A case presentation described management of an iatrogenic gastro-colic fistula created during attempted lumen-apposing metal stent placement for acute cholecystitis in a 93-year-old patient, successfully closed using dual over-the-scope clips under simultaneous endoscopy.

KEY POINTS

- The speaker reported that a lumen-apposing metal stent intended for gallbladder drainage was malpositioned, creating a communication between the stomach and ascending colon in a 93-year-old patient with recurrent cholecystitis.
- The team waited two weeks to allow tract maturation before removing the stent and closing the fistula, using simultaneous gastroscopy and colonoscopy under general anesthesia with two over-the-scope clips (one gastric side, one colonic side, the latter 12mm).
- Post-procedure imaging with Gastrografin showed complete closure without leakage; the patient subsequently underwent percutaneous cholecystostomy for the underlying cholecystitis.
- The speakers emphasized that managing this complication required extensive resources including dual endoscopy teams, skilled nurses, device specialists, time for setup and emotional management of the team.
- The presenting team highlighted the importance of simulation training, post-error debriefing without blame, and recognizing the expert knowledge of endoscopy nurses as key lessons from the case.

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