

ENDOSCOPIC TREATMENT PARADIGM FOR CHOLECYSTODUODENAL FISTULA: APPLICATION OF ENTERAL NUTRITION SUPPORT COMBINED WITH DUODENAL STENT PLACEMENT

Hangbin Jin

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Poster

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A case report describes successful management of cholecystoduodenal fistula in an 84-year-old high-risk patient using endoscopic duodenal stenting after failed conservative therapy.

KEY POINTS

- Cholecystoduodenal fistula is a rare gallstone complication causing abnormal communication between the gallbladder and duodenum, with surgical treatment carrying significant risks in elderly patients with comorbidities
- An 84-year-old woman with hypertension, type 2 diabetes, and myocardial infarction presented with intermittent right upper quadrant pain and fever, diagnosed with CDF by CT and gastroscopy showing gallstones in the duodenal bulb with a fistulous opening
- Initial conservative therapy with antibiotics, acid suppression, and nasojejunal nutrition failed, with follow-up CT at 20 days showing persistent fistula patency
- A multidisciplinary team performed endoscopic dilation of pinpoint stenosis in the duodenal bulb followed by successful placement of a fully covered metallic stent, leading to oral intake resumption, discharge, stable stent position, resolution of biliary pneumatosis, and complete symptom relief
- The authors conclude this approach represents a safe, minimally invasive alternative for elderly, high-risk CDF patients meriting further investigation

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