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Summary

ENDOSCOPIC EXTRACTION OF LARGE GASTRIC TRICHOBEZOAR USING ENDOROTOR

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Oesophagus

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A case report describes successful endoscopic removal of a large gastric trichobezoar using EndoRotor, an endoscopic morcellator device, after standard endoscopic instruments failed.

KEY POINTS

- A 19-year-old female presented with a CT-proven gastric trichobezoar measuring 123 x 51 mm that could not be fragmented using multiple standard endoscopic instruments including hot and cold snares, biopsy forceps, argon plasma coagulation, and endoscopic scissors.
- EndoRotor, an endoscopic morcellator device primarily developed for resecting recurrent or scarred gastrointestinal lesions or pancreatic necrosis, was used to make dents in the trichobezoar, facilitating complete fragmentation with hot snares and retrieval via Roth net.
- The authors state this endoscopic approach avoided surgical intervention and resulted in reduced therapeutic morbidity, shorter hospital stay, and quicker return to normal activity for the patient.
- There is no current consensus about the management of large non-obstructing gastric trichobezoars.

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