

Small Bowel Variceal Bleeding Successfully Treated with Percutaneous Coil Embolization

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Published In/Presented At

Malik, A. Vaze, R. Buckshaw, R. Kloska, M. Nellis, E. Wong, SY. (2019, October 25). *Small Bowel Variceal Bleeding Successfully Treated with Percutaneous Coil Embolization*. Poster Presented at: American College of Gastroenterology. San Antonio, Texas.

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Introduction

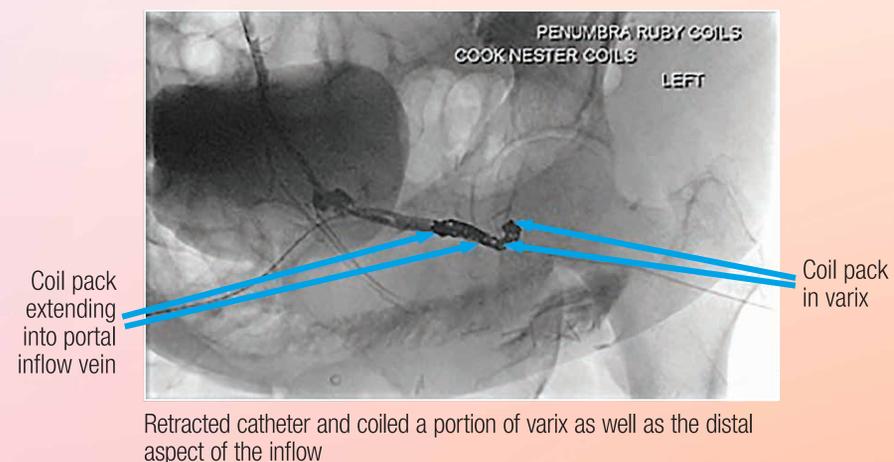
- The small intestine is the most common cause of obscure gastrointestinal (GI) bleeding.
- Approximately 5% of GI bleeding occurs from the small bowel
- Wireless capsule endoscopy, double balloon enteroscopy, and computed tomography enterography (CTE) have improved the ability to investigate these bleeds.

Though further studies are needed to confirm the use of embolization as first line therapy for small bowel variceal bleeding, it should be considered when evaluating small bowel bleeds as it can offer successful outcomes.

Case Description

A 60-year-old female with non-alcoholic steatohepatitis (NASH) cirrhosis was admitted due to dark stools and acute encephalopathy. Prior to this, the patient was worked-up extensively at another facility for the same complaints with EGD, colonoscopy, CTE, and push enteroscopy which was minimally revealing. Initial laboratory values showed a hemoglobin (Hgb) of 9.8 g/dl with a drop to 7.0 g/dl which required transfusion of three units packed red blood cells. She underwent wireless capsule endoscopy that revealed a large, active bleed in the mid small bowel due to varices. Immediately following, the patient underwent successful direct percutaneous access of the small bowel venous varix, supplied by a prominent SMV branch, by coiling a portion of the varix and the venous inflow. After the procedure, there was clinical resolution of the gastrointestinal bleeding and her hemoglobin returned to baseline.

Successful coil embolization of varix



Discussion

- Small bowel variceal bleeding can be life threatening without treatment.
- The treatment of small bowel varices includes surgery, transjugular intrahepatic portosystemic shunt (TIPS), dilatation of a stenosed portal vein, enteroscopic sclerotherapy, and percutaneous embolization.
- Intervention angiography was selected for this patient rather than TIPS due to the presence of hepatic encephalopathy.
- Though further studies are needed to confirm the use of embolization as first line therapy for small bowel variceal bleeding, it should be considered when evaluating small bowel bleeds as it can offer successful outcomes.

Direct percutaneous access of the small bowel venous varix by Interventional Radiology

