

CLINICAL IMAGE

A unique complication of SEMS

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Question: Can you identify the unique complication of SEMS?

Answer: Intraperitoneal stent migration.

This 80-year-old male with known primary colonic pathology required laparotomy for small bowel obstruction. He initially underwent through the scope satisfactory self-expanding metal stent (SEMS) placement for palliation of advanced sigmoid cancer. The main tumor was located at 18 cm from anal verge. DIAGMED, noncovered colorectal stent with 140-mm total length and 122-mm usable length was used in that particular case. The distance from anal verge to inferior end of stent was 16 cm. He had no bowel activity and subsequently developed small bowel obstruction without peritonitis. At laparotomy, he was found to have intraperitoneal stent migration without any fecal soiling and perforation. The span time from insertion to surgery was only 1 week. The gentleman underwent small bowel resection with end ileostomy and had uneventful recovery from operation.

Conflict of Interest

None declared.

Key Clinical Message

Intraperitoneal stent migration should also be considered in any individual with no clinical success post stent insertion.

Keywords

Colonoscopy, colorectal cancer, colorectal diseases, colorectal pathology, colorectal surgery.

