An impacted biliary stone

Maria Triantafyllou, Iosif Beintaris, Dimitrios Polymeros, Konstantinos Triantafyllou
Attikon University General Hospital, Faculty of Medicine, Athens University, Athens, Greece

The most common cause of biliary obstruction is choledocholithiasis. Endoscopic sphincterotomy is the preferred therapy for retained common bile duct stones. However, stones may pass spontaneously or get impacted at the ampulla [1]. Recent data suggest that precut sphincterotomy is a safe and effective technique that facilitates impacted stone extraction [2].

A 60-year-old man was admitted due to obstructive jaundice (total bilirubin: 15.53 mg/dL and direct bilirubin: 11.90 mg/dL) (<0.2 mg/dL) with MRCP with MRCP showing choledocholithiasis, in order to undergo ERCP. During ERCP a stone impacted in the orifice of Vater’s papilla was detected (Fig. 1A). A precut papillotomy was performed with automatic expulsion of the stone (Fig. 1B). The patient was discharged in good general condition with improvement in the cholestatic and hepatic enzymes.

Figure 1 (A) A biliary stone impacted in the orifice of Vater’s papilla (B) Vater’s papilla after precut papillotomy

References