Bouveret's Syndrome Variant

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Dear Sir,

We read with interest the excellent paper Buchs et al. [1] recently published in *Digestion*. In their paper, the authors describe a case of duodenal obstruction related to a huge intraluminal gallstone. They then propose an algorithm for the management of suspected cases of this

condition using a combination of endoscopy and lithotripsy initially, followed by surgery in selected cases. We recently encountered a similar case of obstruction of the duodenum by a large gallstone. In our case however, the gallstone lay outside the duodenum rather than within the lumen

giving a 'pseudo-Bouveret's syndrome' appearance. Because of its position, a different endoscopic approach was required.

An 80-year-old female presented to the emergency department with symptoms of vomiting and abdominal distension. A plain film of the abdomen demonstrated a

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Fig. 1. Plain film of abdomen showing marked gastric dilation in keeping with gastric outlet obstruction.

Fig. 2. Contrast-enhanced CT abdomen with a large gallstone within an intact gallbladder (white arrow) compressing the second part of the duodenum (black arrows).

markedly dilated stomach in keeping with gastric outlet obstruction (fig. 1). A contrast-enhanced CT demonstrated a huge 5-cm gallstone within an intact gallbladder causing marked compression on the second part of the duodenum and secondary gastric outlet obstruction (fig. 2). The features resembled a Bouveret's syndrome in clinical presentation and appearance apart from the fact that the gallstone lay outside the lumen of the duodenum. Endoscopy confirmed extrinsic compression

of the duodenum and no other lesions. The patient was unfit for surgery due to multiple co-morbidities. In view of this, she was treated by endoluminal stenting which caused complete relief of her symptoms.

In summary, we feel that this case adds to the paper by Buchs et al. [1] in demonstrating a variant of Bouveret's syndrome, which was successfully treated by endoscopic means.

Reference

- 1 Buchs NC, Azagury D, Chilcott M, Nguyen-Tang T, Dumonceau JM, Morel P: Bouveret's syndrome: management and strategy of a rare cause of gastric outlet obstruction. *Digestion* 2007;75:17–19.