# Aorto-gastric fistula caused by an esophageal stent used in the treament of bariatric surgery's complications

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**To the Editor,**

We recently observed an unusual complication related to the use of an esophageal stent.

MM, man of 52 years, with history of diabetes type 2, dyslipidemia, arterial hypertension and ischemic heart disease, underwent in 1999 of an adjustable ring gastroplasty to correct morbid obesity. He also underwent a cholecystectomy and an appendectomy complicated by peritonitis.

On May 2013, a gastric bypass was performed to treat recurrence of obesity. This procedure was complicated in June by epigastric pain and vomiting. Gastro-jejunal anastomosis stenosis and gastro-gastric fistula were quickly diagnosed. An endoscopic balloon dilation was performed. In July, regarding recurrence of stenosis and fistula persistence, we decided to implant a Niti-S Beta Taewong type esophageal stent (1).

After six weeks, the patient experienced post-prandial epigastric pain after each meal but he did not come back for advice. Suddenly, in the beginning of September, he presented a massive hematemesis, with collapsing shock. Resuscitation, including intubation, are necessary at home, before transfer and urgent admission in the hospital. After stabilization, a gastroscopy was performed allowing to remove the esophageal stent and to precise the site of bleeding in an area sitting one centimeter above the gastro-jejunal anastomosis without specifying the etiology.

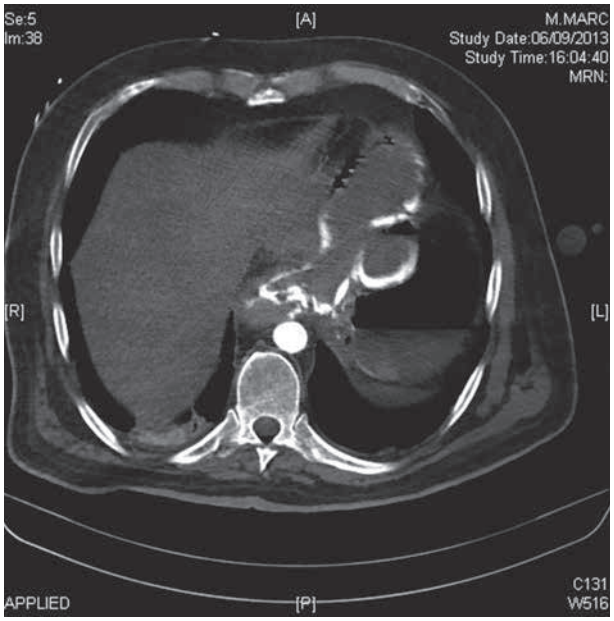


Fig. 1. —

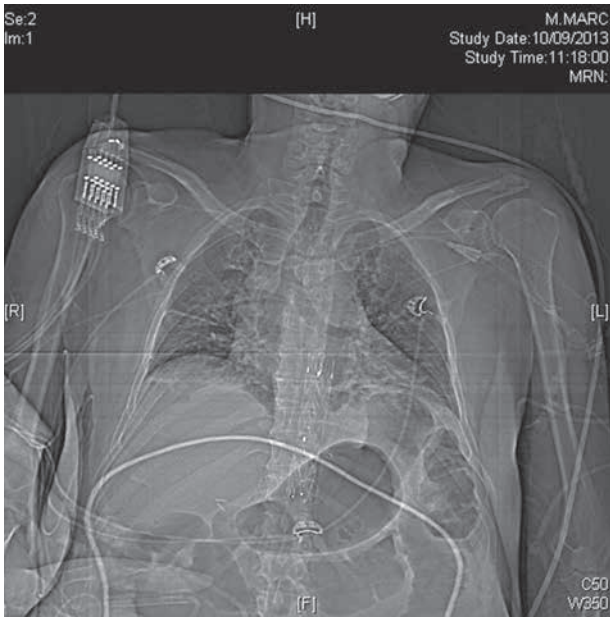


Fig. 2. —

In this context, an angio-scanner was achieved in the following minutes and allowed to highlight an aorta-digestive fistula (Fig. 1). The patient was immediately treated, by aortic stent (Fig. 2).

Multiple transfusions were necessary. After a few days, the clinical situation considerably improved and the patient could be discharged from hospital.

We believe that the patient's surgical history probably facilitated this serious complication.

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To our knowledge, this is the first complication of this kind related with the Niti-S Beta Taewong stent that is considered as effective and safe profile (2), and is regularly promoted in the specific indication of bariatric surgery's complications.

## References

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