Successful bile duct stone removal by ERCP in a patient with situs inversus

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Available online: 20 July 2018

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A 48-year-old male was hospitalized for acute pancreatitis associated with cholangitis. Computed tomography scan and biliary MRI revealed transposition of the heart and visceral organs from the right to left side and a stone in the common bile duct (CBD) (Figures 1-2). Endoscopic retrograde cholangiopancreatography (ERCP) was performed. The patient was placed in the right lateral decubitus position. The papilla was oriented to the right side at the 3 o’clock position (Figure 3). Wire-guided

Figure 1
Computed tomography scan confirming situs inversus with the liver seen on the patient’s left side and the spleen on the right
Figure 2
Biliary MRI showing situs inversus with transposition of the stomach, duodenum and biliary tract with a CBD stone.

Figure 3
Endoscopic view during endoscopic retrograde cholangiopancreatography (ERCP) showing the position of the papilla oriented at the left side at 3 o'clock after endoscopic sphincterotomy.
canulation and endoscopic sphincterotomy were successfully performed. Bile duct stones were extracted by Balloon and Dormia. A nasobiliary drain was positioned into the CBD. After procedure, a Cholangiogram revealed clearance of the CBD and confirmed the transposition to the left side (Figure 4). No complications occurred and patient underwent coelioscopic cholecystectomy after 6 months.

Disclosure of interest: the authors declare that they have no competing interest.