Question 29 – February 18

A 78-year-old female presents with abdominal pain (RUQ) with nausea and vomiting that had been intermittent for the past several years. She presented to the emergency room when her symptoms progressed. She had a CT scan of the abdomen performed and subsequent EGD, which demonstrated:

Which of the following do you recommend?

A. Endoscopic removal
B. Endoscopic removal with fistula repair
C. Cholecystectomy
D. Enter lithotomy with fistula repair
E. No further intervention

Answer: A

The patient has Bouveret’s syndrome, which is a gastroduodenal obstruction from an impacted gallstone in the setting of a cholecystoduodenal fistula. Endoscopic therapy remains first-line treatment. Fistula repair is not necessary as it may close without further intervention.