Spontaneous Esophageal Stent Fracture: Original Image

Spontan Özofageal Stent Kırılması

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Today, covered self-expandable metallic stent placement is an important palliative treatment method for inoperable esophageal cancer. Placement of esophageal stents is a simple, fast, and effective method that enables swallowing in up to 90% of cases. However, life-threatening early and late complications are observed in relation to esophageal stent placement.[1-3] Major complications related to stent placement include bleeding, aspiration pneumonia, tracheal compression, perforation, and esophagorespiratory fistula. Minor complications related to stent placement include chest pain, tumoral overgrowth, stent migration, gastroesophageal reflux, stent placement failure, hiccup, foreign body sensation, stent expansion failure, tumor ingrowth, granulation tissue formation, and food bolus obstruction.[1] Spontaneous stent fracture has been very rarely reported in the literature.[4]

A 79-year-old woman presented with progressive dysphagia and weight loss. An endoscopy detected a distal esophageal tumor. Histopathological examination was re-

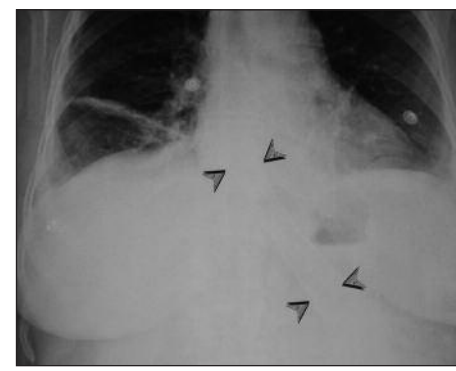

FIGURE 1: Postero-anterior chest radiograph; stent in the esophagus after first procedure.

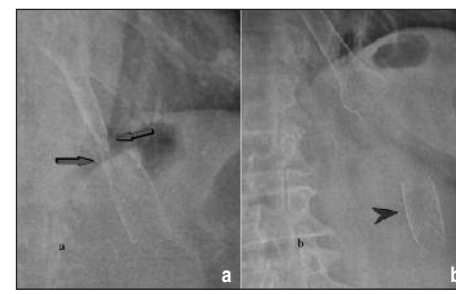

FIGURE 2: a. Radiograph, eight months after esophageal stent placement. Fracture due to compression of the stent is evident. **b.**Second stent shown on plain radiograph. Part of first stent distally broken off, falling into the stomach.

ported as squamous cell carcinoma. Computed tomography showed liver metastasis. A covered, self-expandable metallic 12 cm Ultraflex esophageal stent (Boston Scientific, Natick, MA, USA) was used in patient treatment; no complications due to stent placement occurred (Figure 1). Eight months later, the patient again presented with dysphagia. A posteroanterior chest X-ray revealed what appeared to be a broken distal stent with compression of the tumor (Figure 2a). Three days later, the stent was completely fractured, and a second stent was implanted (Figure 2b). The broken pieces of the stent were removed endoscopically (Figure 3).

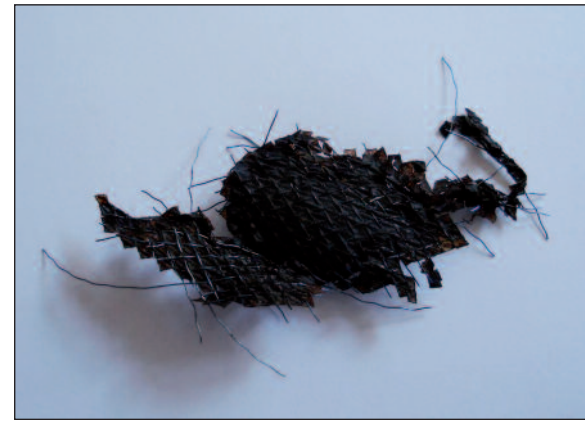

FIGURE 3: Pieces of stent removed at esophagoscopy.

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