

Non-Variceal Bleeding in Cirrhosis-Ileal Polyp Managed by Enteroscopic Hemoclips Application

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Clinical Presentation

61 years old female with compensated cirrhosis due to non-alcoholic steato-hepatitis and diabetes mellitus was admitted with recurrent melena requiring multiple blood transfusions. Her esophagogastroduodenoscopy showed small oesophageal varices, while colonoscopy was normal. Considering possibility of ectopic varices, she underwent capsule endoscopy which showed polypoidal lesion in ileum (Figure 1) with altered blood in distal ileum and colon. She underwent single balloon retrograde enteroscopy which revealed small polyp in ileum with active ooze (Figure 2), for which two hemoclips were applied. Post procedure recovery was uneventful and at one month follow-up her haemoglobin was stable (Figure 3).



Figure 1: Capsule endoscopy showing polypoidal lesion in ileum.



Figure 2: Retrograde enteroscopy showed small polyp in ileum.

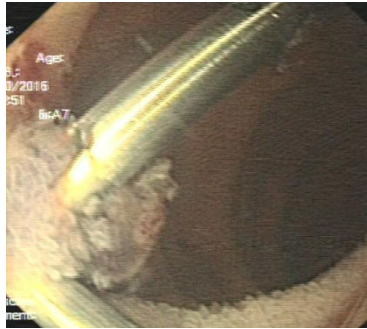


Figure 3: Enteroscopic hemoclips for ileal polyp.