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Commentary: Metallophagia: Splenic Artery pseudoaneurysm after foreign body ingestion and retrieval ☆,☆☆

First, I thank our GI colleagues for reading the paper and offering their perspective. The purpose of this case report was to highlight the unique circumstances associated with this case, (a rare Pica, multiple episodes of metal FB ingestions, the pictures of multiple foreign bodies in the GI tract) that ultimately culminated in splenic artery embolization. We have performed several splenic artery embolizations, but this was the first time we did it in the background of foreign body ingestion. The case report was written to highlight the use of this procedure in the rare situation and not to focus on what caused it. We do acknowledge it is still unclear as to what caused the pseudoaneurysm and hence in our conclusion, even though the pseudoaneurysm was detected and treated after the last endoscopic removal, we hypothesize that other factors may have contributed/caused it. This case already had so many unique features and the fact that endoscopic removal of a 10-inch wrench has never been reported adds value to this publication. Thank you for inviting me to write this commentary.

Author contribution

Study conception (AB, JM, AA, RD), Data collection (JM, AB), Manuscript writing (JM, AB, AA, RD), Critical revision (AB, AA), Final approval (AA, AA, RD, JM, AB).

Patient consent statement

Patient consent was obtained.

Data sharing

Data used in this study are not shared publicly.

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