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Hepatobiliary Fascioliasis: An Uncommon Cause of Biliary Obstruction in the United States

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Case Report

A 43-year-old woman presented with recurring upper abdominal pain. She had a 5-year history of symptomatic cholelithiasis without improvement following cholecystectomy. She had no prior history of elevated liver tests or jaundice. Her travel history was pertinent for annual trips to the Bahamas. On admission, the patient had a bilirubin of 4.7 mg/dL and liver enzymes more than 5 times the upper limit of normal. Abdominal computed tomography (CT) scan demonstrated a wedge-shaped area of decreased attenuation in liver segment III (Figure 1). Endoscopic retrograde cholangiopancreatography (ERCP) revealed a curvilinear filling defect within the distal common bile duct (Figure 2). Following papillary sphincterotomy, a living parasite was removed from the common bile duct (Video 1) and confirmed by pathology as *Fasciola hepatica* (Figure 3). Nitazoxanide was prescribed. Her liver enzymes normalized after 1 week of therapy, and symptoms resolved completely. Magnetic resonance imaging (MRI) 4 months later demonstrated resolution of all imaging abnormalities.

We describe the case of a healthy patient with biliary obstruction caused by hepatobiliary fascioliasis, likely from eating raw vegetables or watercress in a developing area of the Caribbean, where outbreaks of this

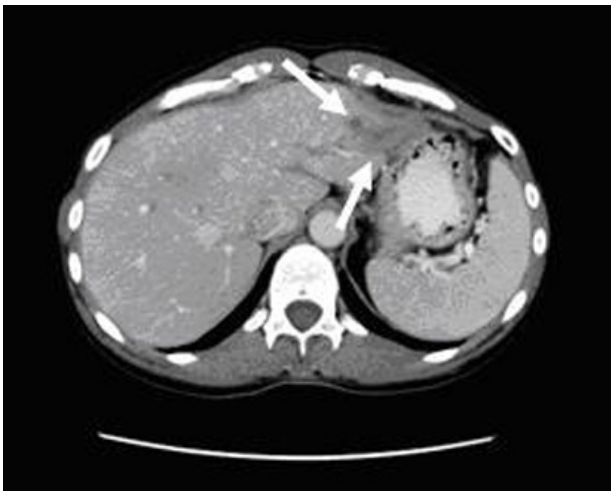

Figure 1. Abdominal CT scan showing a wedge-shaped area of decreased attenuation in liver segment III.

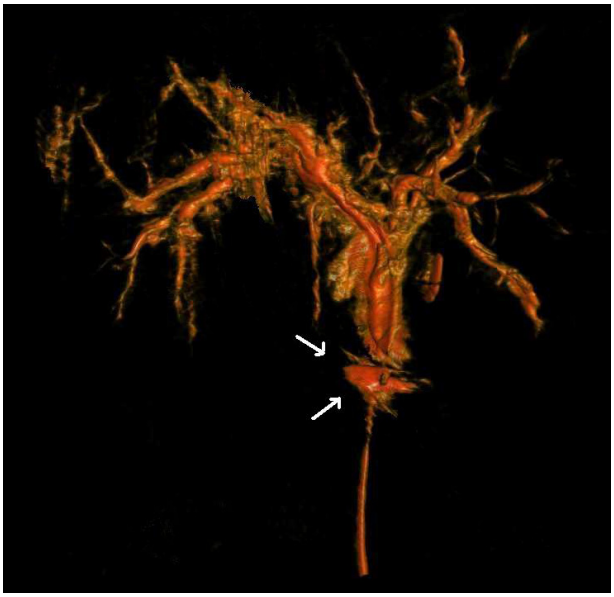

Figure 2. Rotational fluoroscopic 3-D reconstruction image taken during ERCP showing a curvilinear filling defect in the distal common bile duct (white arrows) secondary to obstruction from *Fasciola hepatica*.

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trematode have been noted.[1,2] Further awareness of fascioliasis may help facilitate the diagnosis and management of this rare yet treatable cause of hepatobiliary disease in the United States.

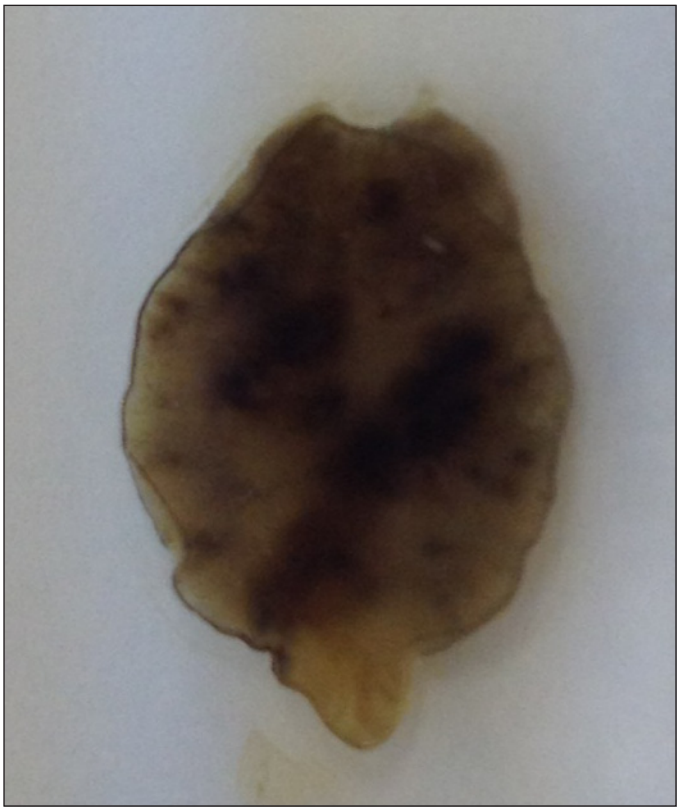

Figure 3. Image of the liver fluke, *Fasciola hepatica*, captured during ERCP.

Video 1. Video demonstrating removal of *Fasciola hepatica* from the common bile duct after retrieval balloon sweep during ERCP. Please view the video at http://acgcasereports.gi.org/?p=1944.

Disclosures

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