Abstracts

## A rare cause of hemosuccus pancreaticus diagnosed with endoscopic ultrasound

K. Pham<sup>1</sup>, G. Pedersen<sup>1</sup>, H. Halvorsen<sup>1</sup>, D. JÃ<sub>3</sub>ssang<sup>1</sup>, R. Havre<sup>1</sup>, G. Dimcevski<sup>1</sup> <sup>1</sup>Haukeland University Hospital, Bergen, Norway, <sup>2</sup>Haukeland University Hospital, Bergen, Norway

Introduction: Hemosuccus pancreaticus (HP), hemorrhage from the papilla of Vater through the pancreatic duct (PD), is a rare cause of upper gastrointestinal bleeding. It may be caused by chronic pancreatitis, pseudoaneurism and pancreatic tumors. Only 2% of HP involves the hepatic arteries. Endoscopic ultrasound (EUS) may not only visualize the presence of HP, previously seen on computed tomography/magnetic resonance imaging (CT/MRI), but also reveal additional pathology.

**Case Report:** A 62-year-old man was admitted with severe intermittent gastrointestinal bleeding. He underwent gastroscopy, colonoscopy and capsule endoscopy without sign of bleeding. The patient had no previous history of pancreatitis or infection. On CT and MRI scan with angiography, an aneurism of the common hepatic artery (CHA) was found, with a dilatation of the main PD



## Abstracts

toward the tail of the pancreas, but no apparent source of bleeding. EUS was then performed, and could show a partial thrombosed aneurysm of a hepatica with a diameter of 5 cm. In addition, a narrow fistula between the hepatic artery and PD could be identified using power Doppler. The patient was subsequently operated, which revealed a thrombosed arteriosclerotic aneurysm in the CHA with fistula to the PD.

**Conclusion:** To the best of our knowledge, this is the second reported case of a severe gastrointestinal bleeding due to a fistula between the CHA and PD. The use of EUS in diagnosing this rare condition has not been reported before, but seems feasible.

Status of the presenting author: Chief resident The authors declare: No significant relationship.