



Embedded and Fractured Esophageal Self-Expanding Metal Stent

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Clinical Image

A 70-year-old hypertensive patient underwent right bilobectomy for pulmonary carcinosarcoma. Five days after the procedure, he presented esophageal fistula treated endoscopically by a 12 cm partially covered metal stent. The patient was lost of view during three months after procedure. He presented then for dysphagia. Upper endoscopy (Figure 1) and CT scan (Figure 2 and 3) showed an impacted and fractured stent. The stent could not be removed endoscopically due to the embedding of the uncovered stent ends in the esophageal wall.



Figure 1: Upper endoscopy showing and embedding of the upper metallic stent end in the esophageal wall.

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Figure 2: CT scan (coronal slice) showing an embedding of the two ends of the stents in the esophageal wall with median fracture of the stent.

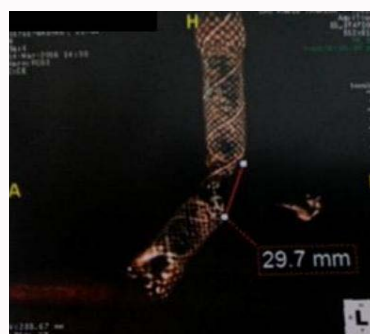


Figure 3: CT scan (reconstruction) showing the median fracture of the esophageal stent.