

Haemobilia - A Rare Cause of Upper Gastro-Intestinal Bleeding

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Abstract

Haemobilia is a rare cause of upper gastrointestinal bleeding that consists of haemorrhage within the biliary tree. Most cases of haemobilia are due to iatrogenic cause, laparoscopic or open cholecystectomy, abdominal trauma, gallstones, hepatic tumours, vascular aneurism. We present the case of a male patient admitted in the surgery department for epigastric and right hypochondria pain, nausea and vomiting. Open cholecystectomy was performed with a trans-cystic tube drainage. Postoperative outcome was favourable but with a continuous decrease in haemoglobin level. In the 13th day postoperatively biliary drainage was 800 ml - haemobilia. Patient health status altered and melena and hematemesis occurred. Endoscopy, cholangiography and abdominal computer tomography (CT) were performed. The episode repeated in day 27 after initial surgery. Duodenotomy and exploration of the biliary tree was performed. Angiography was performed next day that revealed biliary-arterial fistula within segment IV of the liver followed by embolization. Haemobilia reoccurred fifteen days later and colonoscopy and angiography were performed. Embolization with metallic coils was performed. Patient outcome was favourable and was discharged 13 days after second embolization. Interventional angiography remains the first treatment option of haemobilia. Selective arterial ligation or hepatectomy remain the options in case of lack of angiography or insufficient results after embolization.

Key words: haemobilia, angiography, cholecistectomy