TÍTULO: Stents as a treatment for esophagojejunal leak after total gastrectomy or esophagectomy for neoplastic disease

OBJECTIVO/INTRODUÇÃO: Anastomosis leak is a fearful complication of gastric and esophageal resection, given its high morbidity and mortality rate.

MATERIAL E MÉTODOS: Retrospective analysis of patients who underwent surgical oncological resection (SOR) for oesophageal and gastric carcinoma, from Jan 2010 - Apr 2016. Imagological, endoscopically or intra-operative diagnosis of esophagogastric or esofagojejunal anastomosis leak (EEAL) were included. Systemic inflammatory status, major or minor leak and presence of local complications.
RESULTADOS: 122 patients were submitted to total gastrectomy or esophagectomy. Of 10 cases of EEAL, 6 were treated with metallic auto expansible totally covered stent. All attained immediate technical success. 1 showed leak persistence, requiring endoscopic reposition of the stent. 1 presented with stenosis after stent withdrawal and was treated with endoscopic dilation. Another was diagnosed with an anastomotic haemorrhage and leak. 3 days after stent placing, having died due to multiorgan failure (MOF). One died of MOF, despite presenting no leak after stent placement.

DISCUSSÃO: EEAL after SOR is uncommon and its surgical approach still involves significant morbidity and mortality. Stent placement is a feasible and reproducible approach in reference centres, although is still related to a significant rate of unfavourable outcomes. There is no clear evidence of what approach suits each patient best.

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