

A Case of PEG-induced Pancreatitis

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Introduction

- PEG (percutaneous endoscopic gastrostomy) tube placement is considered a relatively safe procedure
- Common complications include bleeding, infection, buried bumper syndrome, and dislodgment
- Very rarely the tube migrates into the duodenum, obstructing the ampulla, causing biliary obstruction and pancreatitis

Case Presentation

- An 83-year-old male with a history of stroke-related dysphagia, had a PEG tube placed one year ago, presented with a day of vomiting and epigastric pain
- On presentation, lipase was 1761 (reference 8-69 U/L), alkaline phosphatase was 145 (reference 36-112 IU/L), transaminases, bilirubin, and triglycerides were normal

Case Presentation (contd.)

- Abdominal CT scan showed a migrated PEG tube balloon in second part of the duodenum at level of the ampulla (Figure 1)
- As it turned out patient was tolerating oral diet thus PEG was no longer needed
- GI team deflated the balloon and removed the PEG without any further complications. With aggressive fluid resuscitation, patient's symptoms resolved after two days



Figure 1. Migration of PEG tube balloon to second portion of duodenum at the level of the ampulla

Discussion

- Pancreatitis due to migrated PEG tube obstructing the ampulla is a rare entity, with only a few case reports published
- Patients can present with nonspecific symptoms with significantly elevated hepatic and pancreatic enzymes
- CT findings can show pancreatic inflammation and biliary/pancreatic duct dilation with PEG bumper at level of ampulla
- Physical exam findings would reveal very little external tubing indicating distal internal migration of PEG bumper
- Interestingly this can also cause intermittent gastric outlet obstruction
- Treatment is PEG tube removal/replacement, and IV fluids
- Marking the tube at the insertion site can help in diagnosis of migration, if it happens. Patients and care givers should be educated about tube care, regular follow-ups to ensure positioning and to ascertain the timing of removal