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Case Report
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A "Double Route" to Duodenum: The Unusual Case of Healing's Bleeding Ulcer

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Abbreviations: NSAID: Non-Steroidal Anti-Inflammatory Drugs; PPIs: Proton Pump Inhibitors; EGDS: Esophagogastroduodenoscopy; DP: Double Pylorus

Case Report

A 79-year-old woman was admitted to the emergency room of our hospital for hematemesis and syncope(Hb was 9.9 g/dl). She referred chronic use of NSAID (Non-Steroidal Anti-Inflammatory Drugs) for arthralgia without any concomitant proton pump inhibitors (PPIs). An EGDS (Esophagogastroduodenoscopy) was promptly performed and a 25 mm, actively bleeding pre-pyloric antral ulcer was diagnosed (Forrest 1b).

A combined endoscopic treatment (epinephrine submucosal injection + clip placement) was successfully performed. A rapid urease test was negative. The patient was further treated with high dose of intravenous PPIs until she left hospital. Bleeding did not recur, and Hb level remained stable. At 1 month, a follow up EGDS was performed and a pre-pyloric fistula was highlighted. The duodenum could easily be entered via both of the pyloric channels.

Double pylorus (DP) is a rare condition (observed in 0.001% to 0.4% of upper gastrointestinal endoscopies) involving a double communication between the gastric antrum and the duodenal bulb [1]. Mostly, DP is a complication of a penetrating ulcer, a condition named acquired DP. Otherwise, DP occasionally occurs as a congenital abnormality, either isolated or in combination with other congenital abnormalities [2].

Conclusion

An acquired DP in our case was finally diagnosed.

References

1. Wiseman SM, Tan D, Hill HC (2005) Double pylorus: an unusual endoscopic finding. Endoscopy 37(3): 277.
2. Christien G, Branthomme JM, Volny L, Deschamps P, Morice A (1971) Double pylorus: a congenital malformation. Sem Hop 47(23): 1485-1488.