BLEEDING PSEUDOANEURYSMS SECONDARY TO SLEEVE GASTRECTOMY LEAKS A RARE AND POTENTIALLY LIFE-THREATENING COMPLICATION: A CASE SERIES

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Introduction

Laparoscopic Sleeve Gastrectomy (LSG) is the most common performed bariatric surgery, and while safe and effective, it can be infrequently associated with morbid complications such as gastric leaks and bleeding.

Bleeding in the context of managing a gastric leak post LSG is attributed to a wide range of etiologies. Bleeding can be minimal and obscure or can progress into a life-threatening condition. We are presenting a case series of four patients with bleeding secondary to leak related pseudoaneurysms, this case series is the highest reported in literature.

Methodology

We retrospectively reviewed all patients managed for LSG leaks at a high-volume referral center from the year 2011 – 2023. Of which, four patients developed massive bleeding during their treatment course.

Results

Of 165 patients who were managed for gastric leaks post LSG, four patients (2.4%) developed massive bleeding from a pseudoaneurysm. Presentation ranged from melena and bleeding within the drain output to hemorrhagic shock.

Three were from splenic artery pseudoaneurysms and one from an inferior phrenic artery pseudoaneurysm. Two patients needed emergent laparotomy to control the bleeding. One of which arrested during the procedure, however, revived after CPR and control of the bleeding. The other two were managed with angioembolization. All patients survived their massive bleeding, healed their leaks, and recovered well.

Conclusion

Bleeding from pseudoaneurysms post LSG leaks can be life threating. Early recognition and management can be lifesaving and allows for a less invasive angioembolization rather than surgical control.

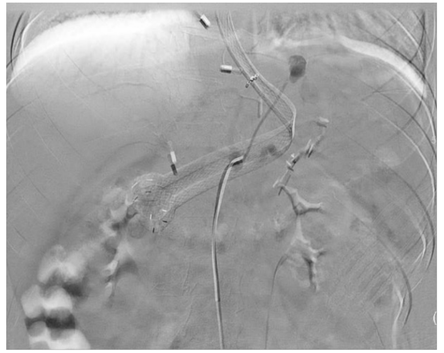


Figure 1: Angiogram showing inferior phrenic artery pseudoaneurysm post gastric leak.



Figure 2: CT Scan showing splenic artery pseudoaneurysm post gastric leak.