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Vascular migration of DJ stent into the inferior vena cava and the right atrium – A case report

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Introduction: We report a rare case of migration of double J stent (DJS) into the vascular system following a attempted ureteroscopy for a lower ureteric calculi. We discuss the presentation, management and various treatment options available in such a scenario.

Case: A 43 years old patient presented to the outpatient department with history of attempted ureteroscopy for a lower ureteric calculus done elsewhere. The operating surgeon had difficulty in negotiating the stone and placed a double J stent with difficulty. The contrasts enhanced computed tomography (CECT) showed a DJS which had migrated into the external iliac vein and into the inferior vena cava and the atrium. The CECT scan did not show the lower end of the stent in the bladder. We performed a semi rigid ureteroscopy, the lower ureteric calculus was visualized and fragmented, following the fragmentation, the ureteroscope was negotiated into the upper ureter, the stent could not be visualized in the ureter. The patient was explored through a Gibson's incision and a vascular control was gained proximally and distally with a satinsky clamp and the stent removed

Conclusion: Vascular migration of ureteric stents is a rare but morbid complication. The "key" to management include high degree of suspicion and early management. The treatment options include endourologic, endovascular and open approach in management.

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