A Bone causing trouble: the case of an invisible fishbone

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Introduction:
In most cases, causes of cholangitis include biliary calculi, benign biliary stricture, and malignant obstruction. Most of which are identifiable by contrast CT or magnetic resonance cholangiopancreatography (MRCP). We report a case of recurrent cholangitis due to accidental ingestion of a fishbone, which was difficult to detect by conventional imaging.

Case Presentation:
An 82-year-old man with gastric cancer and liver abscess status post right hepatic lobectomy with hepaticojejunostomy and Braun anastomosis presented to our clinic with a chief complaint of fever, fatigue and mild epigastric discomfort. His vital signs were temperature 37.0°C, blood pressure 139/84mmHg, heart rate 61/minute, and respiratory rate 16/min. Physical examination was notable for mild liver tenderness, and laboratory tests showed AST of 122, ALT 84, but no white blood cell count elevation. A working diagnosis of cholangitis was made, however, MRCP showed no cholestasis nor gall stones. He was admitted for two weeks of intravenous (IV) antibiotics because of suspicion for retrograde cholangitis. He was discharged home without any symptoms or laboratory abnormalities. A week later, he re-presented with the same symptoms, and was admitted and treated with IV antibiotics. On the next day, endoscopic retrograde cholangiopancreatography (ERCP) revealed a needle-like foreign body in the common bile duct, which was identified as a fishbone on analysis. He later reported that he had mackerel sashimi, and believed that he ingested the bone accidentally. After removal of the fishbone by ERCP, he was discharged with no further recurrence.

Discussion:
Twelve case reports indicate cholangitis due to fishbone ingestion, and more than half of them were after gastrointestinal interventions, indicating that absence of the sphincter of Oddi may have contributed. Thus, taking a careful dietary history may help with the diagnosis, especially in patients following gastrointestinal procedures.