Edamame (green soy beans) biliary stones

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DESCRIPTION

We present the case of an 89-year-old tiny woman who presented with a 2-day history of fever. Her medical history included gallbladder stones, hypertension, osteoporosis, rheumatoid arthritis and dementia. Vital signs showed an elevated temperature of 38.3°C and tachypnoea. She was frail with a body weight of 28 kg. There was no abnormality on the abdominal examination. However, abdominal CT scan showed dilation of common bile duct with numerous large-sized stones (figure 1) mimicking 'edamame' (figure 2).¹

For diagnosis of acute cholangitis associated with common bile duct stones, antibiotics were initiated and endoscopic stone removal was conducted with a complication of retroperitoneal perforation, which was treated conservatively; placement of metal biliary stent was conducted secondarily. After the procedure the patient made a good clinical course and she was eventually discharged home.²

Figure 2 'Edamame' (green soy beans).

Figure 1 Coronal image of abdominal CT scan showing dilation of common bile duct with numerous large-sized stones (white arrows) mimicking 'edamame'.

Learning points

- ▶ Elderly patients with gallbladder stones may develop multiple common bile duct stones masquerading as 'edamame'.
- ▶ Multiple common bile duct stones are a common cause for acute cholangitis which may not be associated with abnormality of abdominal examination.
- ▶ Endoscopic management is also effective for the treatment of multiple common bile duct stones even in extremely elderly patients.

Competing interests None.

Patient consent Obtained.

Provenance and peer review Not commissioned; externally peer reviewed.

REFERENCES

- 1 Maple JT, Ben-Menachem T, Anderson MA, *et al*; ASGE Standards of Practice Committee. The role of endoscopy in the evaluation of suspected choledocholithiasis. *Gastrointest Endosc* 2010;71:1.
- 2 Katsinelos P, Paroutoglou G, Kountouras J, *et al*. Efficacy and safety of therapeutic ERCP in patients 90 years of age and older. *Gastrointest Endosc* 2006;63:417–23.

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