Bleeding anorectal varices: successful treatment with transjugular intrahepatic portosystemic shunting (TIPS)

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A patient with severe recurrent rectal bleeding from anorectal varices due to portal hypertension because of hepatitis C virus related liver cirrhosis is presented. As illustrated by the report, it is essential to differentiate bleeding anorectal varices from bleeding haemorrhoids because treatment is different. In our patient, implantation of a transjugular intrahepatic portosystemic shunt (TIPS) led to an impressive regression of the anorectal varices, which could be demonstrated by sigmoidoscopy, endosonography, and magnetic resonance imaging. Recurrent rectal bleeding in a patient with portal hypertension should alert the physician to consider anorectal varices. Endoscopic ultra-sound and magnetic resonance imaging are new and non-invasive modalities for diagnosis and post-treatment control.

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