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# Bleeding control of an aortoesophageal fistula with a Sengstaken-Blakemore tube

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# Aortoesophageal fistula (AEF)

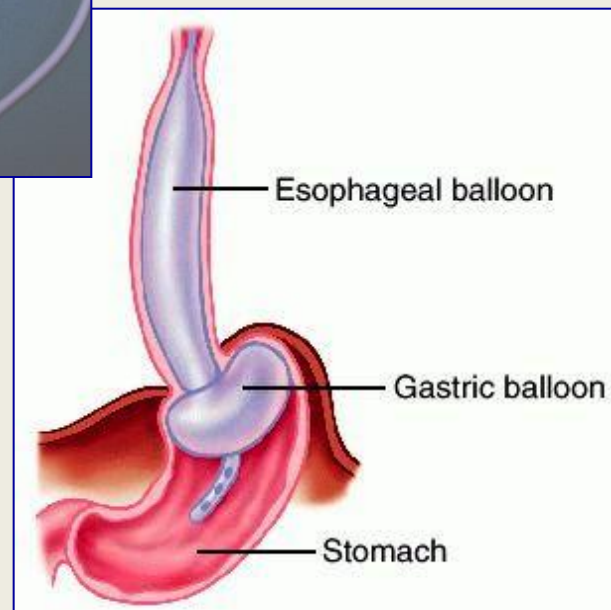
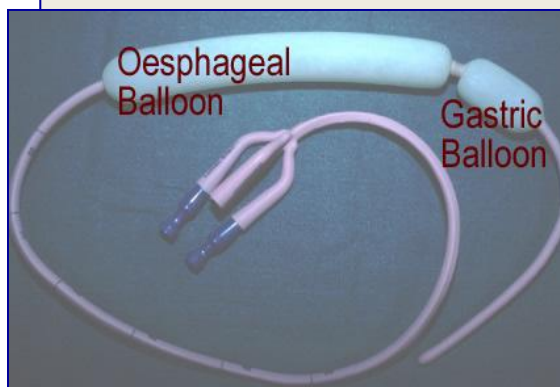
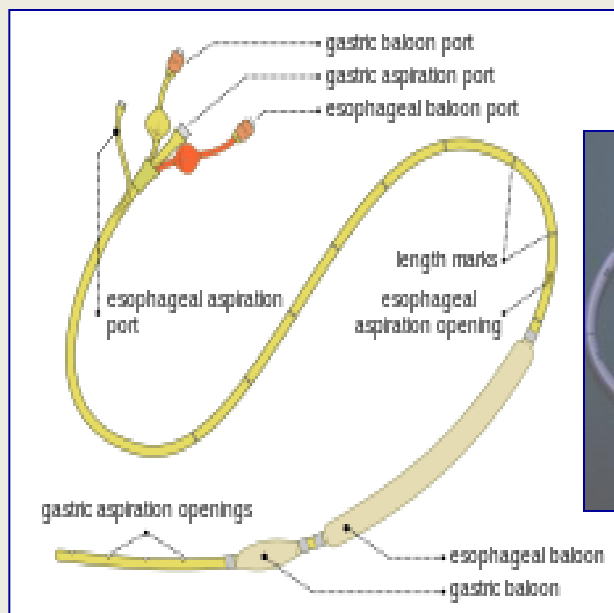
- relatively rare but life-threatening cause of **upper GI bleeding**
  - **massive exsanguination**
- **primary / secondary**
  - **majority secondary and in a setting of prior aortic reconstructive procedures**
- **transient self limited “herald bleed” may precede exsanguination**

Hollander JE, Quick G. *Aortoesophageal fistula: a comprehensive review of the literature*. Am J Med. 1991 Sep;91(3):279-87

Isasti G, Gómez-Doblas JJ, Olalla E. *Aortoesophageal fistula: an uncommon complication after stent-graft repair of an aortic thoracic aneurysm*. Interact Cardiovasc Thorac Surg. 2009 Oct;9(4):683-4

**Can a Sengstaken-Blakemore tube be life-saving  
as a first procedure?**

# The Sengstaken-Blakemore tube (modern version, Minnesota tube)



- rarely used at present
- flexible plastic tube containing internal channels and two inflatable balloons
- an opening at the stomach
- an opening at the upper esophagus

- Unusual life-saving use of the Sengstaken-Blakemore tube
  - preventing fatal exsanguination from an AEF
- Sengstaken-Blakemore tube used far less commonly where endoscopic intervention is available
- Rare but devastating consequences from insertion and residence
  - esophageal and gastric ulceration and perforation
  - acute airway obstruction
  - bronchoesophageal fistula

Seet E, Beevee S, Cheng A, Lim E. *The Sengstaken-Blakemore tube: uses and abuses*. Singapore Med J. 2008. Aug;49(8):e195-7

- JGJ, male, 48 yo
- known pré-existing chronic hepatic disease with EG varices
- ruptured proximal descending aortic aneurysm
  - **emergency stent graft placement**



- few hours later, **massive bright red hematemesis**
- **immediate treatment:**
  - **endotracheal intubation**
  - **fluids**
  - **hemorrhage control with a Sengstaken-Blakemore tube**



- endoscopic control, next day, showed the origin of the bleeding was not the varices but an AEF related with the ruptured aneurism.





## **Conclusion**

**Sengstaken-Blakemore tube can be life-saving as a first procedure in AEF, apart from the potential complications of its use.**