

Liver Abscess secondary to a duodenal-jejunal bypass liner (DJBL) successfully treated with antibiotics but without removal of the device.

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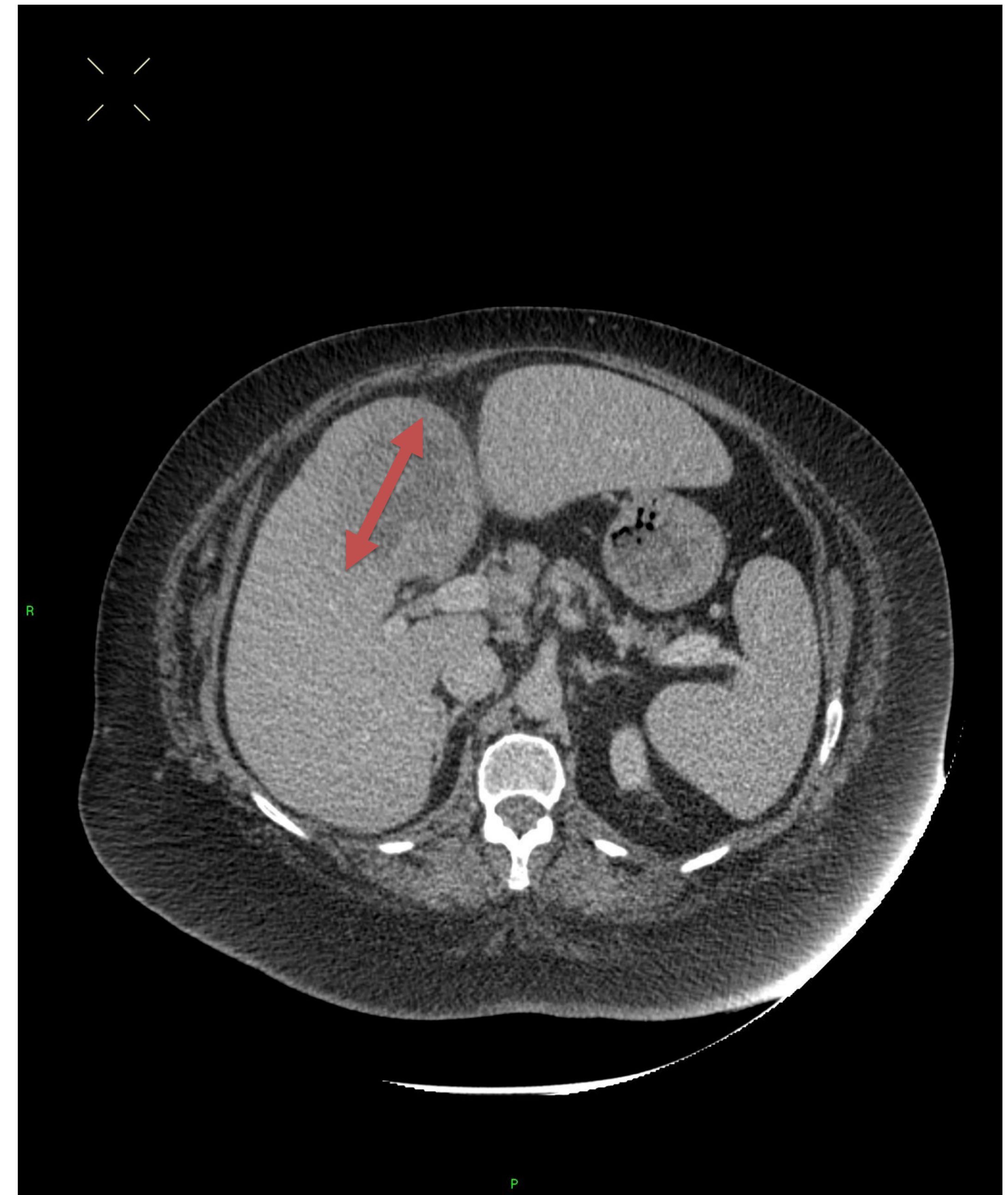
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Endoscopic DJBL therapy is a 60cm impermeable liner open at both ends. This minimally invasive technique improves HbA1c and promotes weight loss in obese patients with T2DM^[1]. Its utility has been questioned owing to the association of this treatment with hepatic abscess although the largest (n=234) German, registry postulates that this may be as low as 1.7%^[2].

We present the case of a 51 year old lady with T2DM (Gliclazide 160 mg twice daily, Liraglutide 1.8mg daily, HbA1c 8.8%), weight 136.2Kg (BMI 53.9kg/m²):- a participant in the ABCD REVISE Diabetesity (ISRCTN00151053) trial. Six weeks following EndoBarrier insertion in July 2014 she presented with nausea, upper abdominal pain and fever. She was found to have a 8.0 x 6.5cm abscess in the left hepatic lobe on CT imaging, not amenable to ultrasound guided drainage (Image A).



(Image A).

Despite counseling the patient refused (because of weight loss already achieved and anticipated) to have the EndoBarrier removed. Antibiotic treatment was commenced with device removal planned if there was no resolution. She was treated with 2 weeks of intravenous Piperacillin/Tazobactam then 12 weeks of oral Ciprofloxacin, resulting in clinical, biochemical and radiological improvement with a reduced abscess size on interval CT of 2.5 x 2.0 cm with only a small abscess remnant seen following device removal at 12 months (Image B). During that time, weight fell by 18.9 kg and HbA1c rose to 9.7% (with Gliclazide halved and Liraglutide stopped). Our case suggests that some, but not all cases of Endobarrier associated hepatic abscess may be treated simply with careful monitoring and antibiotics, without removal of the EndoBarrier device.



(Image B).

[1] de Jonge C, Rensen SS, Verdam FJ, Vincent RP, Bloom SR, Buurman WA, le Roux CW, Schaper NC, Bouvy ND, Greve JW. Endoscopic duodenal-jejunal bypass liner rapidly improves type 2 diabetes. *Obes Surg* 2013 Sep;23(9):1543-60.

[2] Sauer N, Aberle J, Lautenbach A, Saufert J & Laubner K. Safety- and efficacy-outcomes of the duodenal jejunal bypass liner (DJBL) registry in obese patients with type 2 diabetes. Abstract 75, EASD Munich 2016.