The occurrence of pseudocyst is an adverse event (AE) of severe acute pancreatitis (AP) post blunt abdominal trauma. When this type of trauma occurs with pancreatic involvement, the occurrence of AP is frequent. In childhood, about 11% of AP are caused by blunt abdominal trauma. During the evolution, fluid collections from the pancreas can be formed, and when we could observe a continuous growth, signs of infection, bleeding, abdominal pain or obstruction and the treatment is indicated. Currently, endoscopic ultrasound-guided drainage (EUS) is the gold standard for treatment. Hot-Axios system, which has an electrocautery attached, allows the prosthesis to be released inside the transmural region without being necessary a guidewire, dilatation or the use of fluoroscopy. The authors report an unusual case of a 12-year-old boy who suffered blunt abdominal trauma with complete fracture of the pancreas evolving to a large pancreatic pseudocyst requiring the use of Hot-Axios™.

A 12-year-old boy suffered blunt abdominal trauma while riding a bicycle. He developed an episode of severe acute pancreatitis, due to a complete fracture of the pancreas, being treated in the intensive care unit for 34 days. He was discharged from the hospital after 40 days with abdominal pain, post-prandial packing and mesogastrium burning. The patient was emaciated, dehydrated and had signs and symptoms of pneumonia. Laboratory studies revealed a slight increase in pancreatic enzymes. The computerized tomography revealed an 8.5 cm of debris collection with fluid content in pancreatic body which results in a stomach compression (FIGURE 1). Upper digestive endoscopy showed a bulging of the posterior stomach wall and the EUS detected an anechoic pancreatic cyst (9.7 x 9.2 cm), with a fixed and heterogeneous material inside (FIGURE 2). Under general anesthesia, the endoscopic drainage with the 10 x 15mm Hot Axios stent was chosen. After insertion, there was an immediate exit of clear secretion without solid components (FIGURE 3, E-VIDEO*). Total procedure time was 10 minutes and the time required for the Axios geneous material inside (FIGURE 2). Under general anesthesia, the endoscopic drainage with the 10 x 15mm Hot Axios stent was chosen. After insertion, there was an immediate exit of clear secretion without solid components (FIGURE 3, E-VIDEO*). Total procedure time was 10 minutes and the time required for the Axios geneous material inside (FIGURE 2). Under general anesthesia, the endoscopic drainage with the 10 x 15mm Hot Axios stent was chosen. After insertion, there was an immediate exit of clear secretion without solid components (FIGURE 3, E-VIDEO*). Total procedure time was 10 minutes and the time required for the Axios geneous material inside (FIGURE 2). Under general anesthesia, the endoscopic drainage with the 10 x 15mm Hot Axios stent was chosen. 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EUS-guided HotAxios for the treatment of traumatic pancreatic pseudocyst in pediatric patient


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