

Upper Gastrointestinal bleeding secondary to an enormous hairball

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A 17-year-old female high school student, with no remarkable medical history, presented to the emergency department with hematemesis and melena. She reported anorexia, weakness and a mild chronic epigastric pain during the last three months, with unrecorded weight loss.

At presentation, the patient was thin. She had no apparent depressive or psychotic symptoms.

Her physical examination showed stable vital signs and a pale skin. Her BMI was 18Kg/m² but without clinical signs of nutrient deficiency. Abdominal examination revealed a palpable large,



Figure 1. Endoscopic view of the trichobezoar



Figure 2. A huge Stomach-shaped hair ball after being extracted from the stomach

mobile, non-tender and ill-defined solid mass in the epigastric and periumbilical region.

The laboratory tests showed hypochromic microcytic anemia with a hemoglobin level of 7.7g/dl and a mean corpuscular volume of 64 fl. Renal and hepatic functions were within the reference range.

Upper endoscopy revealed an enormous hairball occupying the whole gastric cavity without active bleeding (Figure 1). A longitudinal gastrotomy was performed and a huge mass, measuring 20 ×15 cm and shaped like the stomach, was extracted (Figure 2). The patient discharged home after 6 days, in a good general condition, and was referred to a psychiatrist.

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