Conclusions The diagnostic accuracy of the rapid 'Celiac card' test is high and similar to the sensitivity and specificity of the existing ELISA based 'Euroimmun' kit, which makes it an excellent screening test for celiac disease.

IDDF2018-ABS-0009 BREAKING THE WEB: A CASE OF PLUMMER VINSON SYNDROME IN THE PHILIPPINES

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Background Plummer Vinson syndrome (PVS) is an extremely rare disease characterised by the triad of iron deficiency anaemia, dysphagia and cervical esophageal web. The most accepted possible aetiology of this syndrome is iron deficiency anaemia. The prevalence of anaemia in third world countries is high and yet there is no published case to date of PVS in the Philippines.

Methods We report a case of a 44 years old female, Filipino with two decades of iron deficiency anaemia, a decade of dysphagia with a cervical esophageal web on esophagogastro-duodenoscopy (EGD).

Results After EGD with mechanical dilatation, dysphagia was resolved, and patient now is able to eat a full regular meal. She was given iron supplementation and advised annual esophagogastroduodenoscopy.

Abstract IDDF2018-ABS-0009 Figure 1

Conclusions The triad of iron deficiency anaemia, dysphagia and cervical esophageal web is Plummer Vinson syndrome which can be readily managed by iron supplementation and esophageal dilatation. Patients need to be on annual surveillance EGD due to risk for esophageal or pharyngeal malignancy.

IDDF2018-ABS-0012 GALLSTONE ILEUS: A CASE REPORT ON A 30-YEAR-OLD YOUNG PATIENT AND LITERATURE REVIEW

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Background Gallstone ileus is a rare cause of intestinal obstruction (1%–4% of all cases of bowel obstruction). It affects mainly the older population with a female preponderance. A 30-year-old woman presented to the emergency room with clinical signs of intermittent intestinal obstruction. Diagnostic imaging revealed obstruction of the terminal ileum caused by a 25 mm calculus. The patient completely recovered after urgent surgery. This condition is very rare and more so in a young patient.

Methods A 30-year-old female presented with intermittent vomiting and abdominal pain for 7 days. She had a history of episodic epigastric pain for the last one year and a half.

Physical examination showed a moderately distended abdomen, tympanitic and hypoactive sounds. Rectal examination was normal. Pertinent ancillary tests were done with the following results:

1. Leukocytosis (10.5×10^9 cells/L)
2. Plain abdominal radiograph: dilated small bowels, and air fluid levels.

Whole abdominal CT scan showed pneumobilia and adhesions in the gallbladder wall and duodenal wall, dilated small bowels and an ovoid calcific density with internal hypodensity in the small intestine lumen. The result of which is consistent with the RIGLER TRIAD seen in gallstone ileus.

Results The patient underwent immediate exploratory laparotomy. Intraoperative findings revealed an impacted gallstone measuring 10 cm in widest diameter located at the terminal ileum (40 cm from the ileocecal valve) causing complete bowel obstruction on the proximal part of the ileum and jejunum. The gallbladder was inspected, and a stable cholecysto-enteric fistula was noted. An enterotomy was made on the proximal non-dilated part of the ileum and revealed a large gallstone ($10 \times 4.5 \times 3$ cm). There was difficulty in extracting the stone, so a segmental resection of the involved ileum was done. A 2-layer end-to-end anastomosis was done using silk 3.0.

The postoperative course was uneventful and was discharged improved on postoperative day 4 (hospital day 10).

Conclusions In conclusion, the choice of the surgical procedure is largely determined by the clinical condition of the patient. The single-stage procedure is performed in haemodynamically-stable patients, while enterolithotomy alone is considered sufficient for unstable patients with metabolic derangements.

IDDF2018-ABS-0013 THE COMBINATION OF PEMBROLIZUMAB AND BEVACIZUMAB IN THE TREATMENT OF CHOLANGIOCARCINOMA BRAIN METASTASES: CASE REPORT

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Background Cholangiocarcinoma originates from primary malignant tumours of bile duct epithelial cells. Epidemiology