

**Image of the month****Giant gastric trichobezoar in an adolescent patient[☆]****Tricobezoar gástrico gigante en una paciente adolescente**

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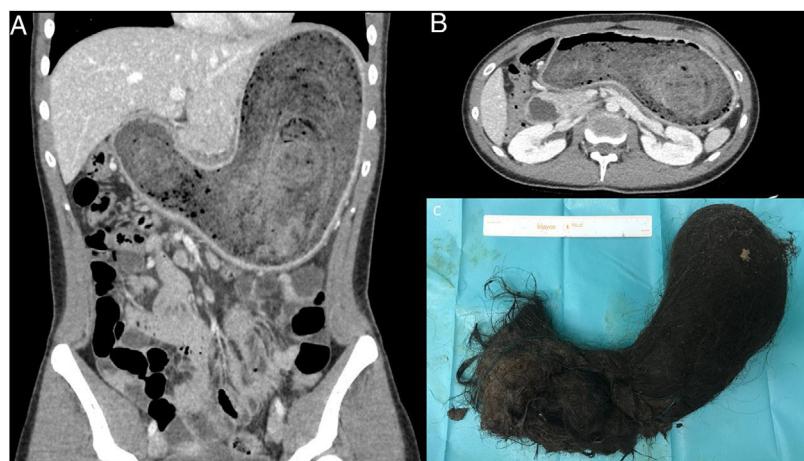


Fig. 1

A 17-year-old female patient consulted for nausea, vomiting and bilious vomiting, with no abdominal pain. On examination, a palpable mass was observed in the epigastrium. The CT scan revealed a large, organized, concentric mass that occupied the entire gastric cavity (12 201 cc), suggestive of a trichobezoar (Fig. 1). Initially, endoscopic treatment was attempted, which was impossible, so a transverse laparotomy was ultimately performed. The specimen was extracted by means of a gastrotomy along the greater curvature (C). In the postoperative period, the patient presented infection of the surgical wound and an intra-abdominal collection, which was treated with ultrasound-guided percutaneous drainage. The patient progressed favorably and was discharged with a referral to the department of psychiatry for evaluation.

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