Hepatic portal venous gas [HPVG] is a rare radiological finding characterised by linear radiolucencies extending to within 2 cm of the periphery of the liver, with numerous aetiologies. Hussain et al. reviewed 275 cases of HPVG and reported that the underlying causes of HPVG include: [1] bowel ischaemia [61%]; [2] inflammation of the gastrointestinal [GI] tract [16%]; [3] obstruction and dilatation [9%]; [4] sepsis [7%]; [5] iatrogenic injury and trauma [3%]; and [6] cancer [2%].1 The present case falls into the category of iatrogenic injury and trauma in addition to inflammation of the GI tract. Bowel necrosis is the most common life-threatening cause of HPVG and typically urgent surgical exploration is necessary due to an expected high mortality rate of 75%.2

However, there are conditions in which the finding of HPVG does not always indicate surgery, such as following an endoscopic procedure. This is the ninth known case of HPVG after colonoscopy. In eight of the nine reported cases, the patients were treated conservatively. The only case that required surgical procedures was a 22-year-old man with Crohn’s disease.3 In all cases, the patients survived and had underlying inflammatory bowel disease [IBD], including two cases of UC and seven cases of Crohn’s disease [Supplementary Table 1, available as Supplementary data at JCC online]. The present case, together with the previous reports, suggests that medically stable patients with HPVG after undergoing colonoscopic procedures, especially IBD patients without peritoneal irritation signs or free air, can be successfully managed with antibiotic therapy and close observation.

Funding
This work was supported by no funding sources.

Conflict of Interest
The authors declare that they have no competing interests.

Acknowledgments
We thank Brian Quinn for checking the language of this article. TT, KH, and TW looked after the patient. TT and KH wrote the manuscript. TW finally reviewed and edited the manuscript and all authors contributed to the report.

Supplementary Data
Supplementary data are available at ECCO-JCC online.

References
Figure 1. An abdominal computed tomography scan demonstrated the collection of gas in the peripheral branches of the hepatic portal vein in the patient, following colonoscopy. A, axial plane; B, coronal plane.