A 55-year-old male with obstructive jaundice associated with alcoholic hepatopathy and chronic pancreatitis underwent ERCP with sphincterotomy and plastic biliary stent placement. He was readmitted due to hematemesis and jaundice. Another ERCP was performed, during which we observed papillary bleeding and migration of the prosthesis, which was exchanged for a coated stent. He was readmitted once again due to hematemesis and shock, and a gastroscopy revealed hemorrhage originating in the bile duct and migration of the stent, which was removed. Arteriography showed evidence of bleeding due to an aneurism of the right hepatic artery secondary to decubitus erosion of the prosthesis. Coil embolization resolved the hemorrhage (Fig. 1).

Fig. 1