

INDETERMINATE BILIARY STRICTURES: A RETROSPECTIVE STUDY

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Poster

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In a retrospective study of 186 patients with biliary strictures and negative initial cytology, 21.5% were subsequently diagnosed with malignancy and 25.8% remained indeterminate after 6-month follow-up.

KEY POINTS

- Of 510 patients treated with ERCP for indeterminate biliary obstruction, 186 (36.5%) had strictures with negative cytology/histopathology at initial evaluation
- Malignancy was confirmed in 40 patients (21.5%) during subsequent testing, with hilar strictures showing the highest malignancy rate at 30% compared to CBD at 23% and intrapancreatic at 16%
- Benign causes were diagnosed in 77 cases (41.4%) including pancreatitis, PSC, ischemia, IgG4-SC, and Mirizzi syndrome
- After 6-month follow-up of 69 indeterminate cases, 17 received a diagnosis (including 5 malignancies), while 48 cases (25.8%) remained indeterminate
- This study is relevant for clinicians managing patients with biliary strictures of unclear etiology who require prolonged monitoring and repeat testing

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