

A MULTIDISCIPLINARY APPROACH TO THE CREATION OF A NEO-BILE DUCT FOLLOWING IATROGENIC BILE DUCT INJURY

Ahamed Khalyfa

UEG Week Copenhagen 2023

Poster

Hepatobiliary

October 15, 2023

A 47-year-old woman with iatrogenic clipping of the common bile duct and hepatic ducts during cholecystectomy was successfully treated with a combined endoscopic and interventional radiology approach, avoiding liver transplantation.

KEY POINTS

- The patient's right and left common hepatic ducts and mid-third common bile duct were clipped during laparoscopic cholecystectomy for gangrenous cholecystitis, leading to jaundice and initial recommendation for liver transplantation.
- A rendezvous procedure was performed in which interventional radiology placed percutaneous transhepatic biliary drains and the endoscopist punctured the common bile duct to pull wires through, establishing drainage into the duodenum.
- 10 French PTBD drains were placed through both hepatic ducts into the duodenum, later exchanged for internal stents at 8 weeks, with eventual complete removal after a neo-common bile duct formed.
- The author reports a series of 4 cases with successful outcomes using this combined endoscopic and percutaneous approach for bile duct injuries that would otherwise require liver transplant or hepaticojejunostomy.

VIEW THIS CONTENT ON GUTFLIX

<https://gutflix.eu/search/d/0e217a46-743d-11ee-ae0e-0242ac140004>



AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.