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Summary

PRE-OPERATIVE DIGITAL SINGLE-OPERATOR CHOLANGIOSCOPY IN PERIHILAR CHOLANGIOCARCINOMA: ROLE IN THE EVALUATION OF PROXIMAL DUCTAL EXTENSION

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A retrospective study of six perihilar cholangiocarcinoma patients found that digital single-operator cholangioscopy with guided biopsies showed 83% concordance with surgical specimens in assessing proximal intraductal tumor extension, with 100% specificity and 75% sensitivity.

KEY POINTS

- Among 48 patients who underwent surgery for perihilar cholangiocarcinoma, six with unclear ductal extension underwent digital single-operator cholangioscopy and guided biopsies for proximal biliary staging after multidisciplinary discussion.
- Twelve biopsies were performed (seven from common duct, two from right duct, three from left duct) and compared to surgical specimens, yielding 83% concordance with six true positives, four true negatives, and two false negatives.
- The two false negative cases included one where cholangioscopic appearance correctly suggested tumor extension despite negative biopsy, and one with perineural invasion and periductal tumor development not detectable by biopsy.
- Radical surgery was achieved in all six patients, and the authors suggest the technique shows very high specificity though they acknowledge the limited sample size.
- The study emphasizes that multidisciplinary approach and accurate preoperative assessment remain of paramount importance for correctly diagnosing and staging perihilar cholangiocarcinoma before surgery.

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