

CHOLANGITIS AND BILIARY RECURRENCE AS LONG-TERM COMPLICATIONS OF ENDOSCOPIC PAPILLARY LARGE BALLOON DILATION: A RETROSPECTIVE MULTICENTER STUDY

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Poster

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A multicenter retrospective study of 1221 patients found that cholangitis occurred in 11.7% after endoscopic papillary large balloon dilation for difficult bile stones, with risk factors including previous ERCP, multiple stones, and stone recurrence.

KEY POINTS

- During median follow-up of 921 days, 143 patients (11.7%) experienced at least one cholangitis episode at a median of 293 days post-EPLBD, with 76% caused by stone recurrence
- Risk factors for cholangitis included previous ERCP before EPLBD (HR 1.65), presence of multiple biliary stones (HR 1.67), and stone recurrence during follow-up (HR 2.86)
- Biliary recurrence requiring ERCP occurred in 16% of patients, and cholangitis risk was homogeneous over time regardless of balloon diameter (above or below 15 mm)
- The study included 1221 patients (median age 77 years) who achieved complete bile duct clearance after EPLBD with balloon diameter ≥ 12 mm, with 81.3% requiring only one session
- This retrospective analysis from 33 centers addresses long-term outcomes of EPLBD, relevant to endoscopists managing difficult bile stones

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