gutflix
GI learning, personalised

Summary

EUS-GUIDED GALLBLADDER DRAINAGE FOR DISTAL MALIGNANT BILIARY OBSTRUCTION IN PATIENTS WITH UNSUCCESSFUL ERCP AND EUS-GUIDED BILIARY DRAINAGE

Frank Weilert

UEG Week Berlin 2025 | Poster

Hepatobiliary

October 7, 2025

Multi-centre study of 28 patients with distal malignant biliary obstruction found EUS-guided gallbladder drainage achieved 100% technical and clinical success as salvage therapy after failed ERCP or EUS-biliary drainage.

KEY POINTS

- All 28 patients achieved technical and clinical success, with mean bilirubin decreasing from 126 umol/L to 63 umol/L at 72 hours and mean hospital stay of 3 days.
- There were no intra-procedural complications and 82.1% of patients required no repeat procedures, with only 5 serious adverse events recorded (cholangitis, recurrent obstruction, and LAMS obstruction).
- The study used a transduodenal approach with electrocautery-enhanced lumen apposing metal stents, predominantly 10mm LAMS (78.6%), in patients with mean age 74 years and high comorbidity burden.
- Sequential deployment in the same session as ERCP and EUS-biliary drainage procedures was feasible, and median survival was 135 days in this advanced malignancy cohort.
- Material is relevant for interventional endoscopists managing non-surgical candidates with malignant biliary obstruction.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/fc3050d0-a812-11f0-ad3b-0242ac140006

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.