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Summary

# ACUTE UPPER GASTROINTESTINAL BLEEDING IN PATIENTS WITH BILIARY TRACT CANCER

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**In a retrospective study of 1033 biliary tract cancer patients, upper gastrointestinal bleeding occurred in 4.0% and was associated with significantly worse survival when caused by tumor infiltration compared to other causes.**

## KEY POINTS

- Among 1033 biliary tract cancer patients treated between 2010 and 2023, 41 patients (4.0%) experienced 60 upper gastrointestinal bleeding events, with tumor infiltration accounting for 24.4% of cases, variceal bleeding 19.5%, and ulcer bleeding 14.6%.
- Patients with bleeding due to tumor infiltration had significantly shorter median survival compared to those with non-tumor-associated bleeding (0.93 versus 6.5 months, p equals 0.018).
- Admission to intermediate or intensive care (odds ratio 6.7) and symptoms of shock at bleeding (odds ratio 2.6) were identified as risk factors for rebleeding within 14 days.
- Endoscopic treatment was performed in 41.5% of index bleeding cases, with recurrence rates of 33.3% after endoscopic therapy and 28.6% after conservative therapy in tumor infiltration cases.
- This study is relevant for clinicians managing biliary tract cancer patients who develop gastrointestinal bleeding complications.

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