

IS THE ANESTHESIOLOGIST STILL NEEDED FOR ENDOSCOPIC ULTRASOUND-GUIDED GALLBLADDER DRAINAGE?

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Poster

Hepatobiliary

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Endoscopic ultrasound-guided gallbladder drainage under conscious sedation achieved 97.9% technical and clinical success with only 2% early adverse events in 49 high-risk patients.

KEY POINTS

- The study prospectively enrolled 49 consecutive patients (mean age 82.9 years) undergoing EUS-GBD under conscious sedation from January 2020 to December 2022, with 95.9% treated for acute cholecystitis in high-surgical-risk patients
- Technical and clinical success rates were both 97.9%, with one procedure failing due to LAMS malfunction and one failing to reduce inflammatory indices
- Only one early adverse event (2%) was reported and no late adverse events occurred
- Three sedation regimens were compared: pethidine plus benzodiazepine (59.2%), fentanyl plus benzodiazepine (36.7%), and benzodiazepine alone (4.1%), with no statistically significant differences in technical success, clinical success, or adverse event rates among groups
- This material is most relevant for interventional endoscopists managing high-risk patients who may not tolerate deep sedation for gallbladder drainage procedures

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