

FACTORS ASSOCIATED WITH THE SUCCESS OF ENDOSCOPIC TREATMENT FOR LARGE STONES AND CHOLEDOCHAL LITHIASIS: FINDINGS FROM A 19-YEAR STUDY

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Poster

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A 19-year retrospective study of 1,011 patients found no significant difference in overall endoscopic treatment success between large bile duct stones (>15 mm) and simpler lithiasis, though acute cholangitis and bile duct strictures independently reduced success rates.

KEY POINTS

- Overall success rates after all interventions were similar between large stones (88.7%) and simpler lithiasis (92.5%), with no statistically significant difference ($p=0.125$).
- Patients with large stones required more reinterventions (14.7% vs 8%, $p=0.009$) and additional procedures (46.2% vs 16.1%) and had lower initial success (55.2% vs 81%, $p<0.001$).
- Early complication rates were significantly higher in the large stone group (10.5% vs 5.1%, $p=0.017$).
- Multivariate analysis identified acute cholangitis (OR 0.295, $p<0.001$) and bile duct stricture (OR 0.53, $p=0.001$) as independent factors decreasing endoscopic treatment success.
- The study included 143 patients with single obstructive stones larger than 15 mm and 868 patients with one or two stones or choledochal lithiasis (defined as more than three stones).

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