

CLINICAL EVALUATION OF 22G NEEDLE WITH NOVEL 0.018-INCH GUIDEWIRE AND NOVEL DILATION DEVICES DURING EUS-GUIDED TRANSHEPATIC BILIARY DRAINAGE

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Poster

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A prospective study of 63 patients found that a 22G needle with a novel 0.018-inch guidewire achieved comparable technical success and safety to a 19G needle for EUS-guided transhepatic biliary drainage in patients with insufficient intrahepatic bile duct dilatation.

KEY POINTS

- In the 22G needle group (n=30, bile duct diameter <1.5 mm), technical success rate was 93.1%, with two failures due to non-identification of the intrahepatic bile duct on EUS.
- The 19G needle group (n=33, bile duct diameter ≥1.5 mm) achieved 100% technical success.
- Adverse events occurred in 10.3% of the 22G needle group and 24.2% of the 19G needle group, with similar mean procedure times between groups.
- This approach may be relevant for endoscopists performing EUS-guided biliary drainage in patients with minimally dilated intrahepatic bile ducts.

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