# OBESITY AS A FACTOR IN ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY OUTCOMES: MYTH OR REALITY?

Huseyin Koseoglu

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**A retrospective study of 828 patients found that BMI did not significantly influence ERCP procedural outcomes, including cannulation success, complications, or readmission rates.**

## KEY POINTS

- In a cohort of 828 ERCP patients stratified by BMI (≤30 vs >30 kg/m$^2$, with subgroups ranging from ≤20 to >35 kg/m$^2$), no significant differences were observed between BMI groups for acute pancreatitis or cholangitis admission rates, ASA scores, cannulation success or time, post-ERCP complications, hospital length of stay, or 30-day readmissions (all p>0.05).
- Women were significantly more obese than men (p<0.001), and higher BMI was associated with increased history of cholecystectomy (p=0.013).
- Non-obese patients had significantly higher CRP (p=0.01) and total bilirubin levels (p=0.011) at admission compared to obese patients, findings the authors note warrant further investigation.
- The study addresses conflicting prior literature on obesity and ERCP outcomes and may be relevant for clinicians managing biliary and pancreatic disorders across diverse patient populations.

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