

COMPARISON OF DIFFERENT ERCP TECHNIQUES FOLLOWING ROUX-EN-Y GASTRIC BYPASS: A SYSTEMATIC REVIEW AND META-ANALYSIS

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Poster

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A systematic review and meta-analysis of 67 studies (2,714 patients) compared three ERCP techniques in patients with Roux-en-Y gastric bypass anatomy and found enteroscopy-assisted ERCP had significantly lower technical and clinical success rates than laparoscopy-assisted ERCP or endoscopic ultrasound-directed ERCP (EDGE), with no significant difference in adverse event rates.

KEY POINTS

- Technical success rates were 78% for enteroscopy-assisted ERCP, 93% for laparoscopy-assisted ERCP, and 96% for EDGE, with significant differences between enteroscopy-assisted ERCP and the other two methods ($p < 0.05$).
- Clinical success rates were 65% for enteroscopy-assisted ERCP, 92% for laparoscopy-assisted ERCP, and 93% for EDGE ($p < 0.05$).
- Overall adverse event rates were 12% for enteroscopy-assisted ERCP, 19% for laparoscopy-assisted ERCP, and 20% for EDGE, with no significant difference between groups ($p = 0.343$).
- The authors state the results question the role of enteroscopy-assisted ERCP in the Roux-en-Y gastric bypass population.

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