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Summary

OTHER WAYS OF TRANSITION – PANCREATICOBILIARY ENDOSCOPY IN THE PEDIATRIC POPULATION. SINGLE, TERTIARY-CARE CENTER EXPERIENCE

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Hepatobiliary

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A retrospective analysis of 19 ERCPs and 7 EUS procedures in 24 pediatric patients demonstrated successful intervention in 18 of 19 ERCP cases with two complications and no EUS complications.

KEY POINTS

- The study included 24 children (mean age 10.7 years) who underwent pancreaticobiliary endoscopy from 2021 to present using regular endoscopes
- ERCP indications included bile duct stones, benign stricture, pancreatic divisum, and disconnected duct syndrome, with successful intervention in 18 of 19 cases
- ERCP complications included one Stapfer II perforation managed endoscopically with a fully covered self-expanding metallic stent and one case of mild post-ERCP acute pancreatitis
- EUS was performed for chronic pancreatitis, pancreatic cystic neoplasia, acute necrotizing pancreatitis, biliary compression, and polycystic pancreas, with 3 tissue acquisitions and 1 transluminal drainage and no complications
- The authors conclude that ERCP and EUS are effective diagnostic and treatment modalities in pediatric patients with acceptable safety profiles

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