

ENDOSCOPIC ULTRASOUND IN ACUTE PANCREATITIS: CAN WE REDUCE RECURRENCE?

James Michael Franklin

UEG Week Copenhagen 2023

Poster

Pancreas

October 15, 2023

Endoscopic ultrasonography identified a biliary cause in 74% of patients with unexplained acute pancreatitis, and subsequent intervention reduced recurrence from 75% to 23% compared with conservative management.

KEY POINTS

- In a retrospective UK study of 97 patients with idiopathic acute pancreatitis (median age 58 years, median follow-up 51 months), EUS was diagnostic in 72/97 (74%) cases after non-invasive imaging failed to identify a cause.
- The most common EUS findings were gallbladder microlithiasis or sludge (n=51), gallstones (n=15), bile duct stones (n=13), and bile duct microlithiasis or sludge (n=11); 65 patients had a biliary aetiology amenable to treatment.
- Patients with a treatable biliary cause who underwent ERCP, cholecystectomy, or both had a recurrent pancreatitis rate of 23% (12/52) versus 75% (8/13, $p<0.01$) in those managed conservatively despite having a biliary aetiology.
- Recurrence rates in patients with non-diagnostic EUS or diagnostic findings not amenable to intervention were 25% (8/32), similar to the intervention group.
- The authors conclude these findings support the use of EUS in patients with acute pancreatitis when non-invasive imaging does not identify a cause.

VIEW THIS CONTENT ON GUTFLIX

<https://gutflix.eu/search/d/8960d7d0-743b-11ee-bd08-0242ac140004>



AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.