

## PREDICTORS OF SPONTANEOUS BILIARY STONE MIGRATION: THE ACTIVE ROLE OF THE GALLBLADDER

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Poster

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**A retrospective cohort study of 104 patients with uncomplicated choledocholithiasis found that 21.6% showed spontaneous stone resolution before ERCP, with an intact gallbladder independently predicting resolution.**

### KEY POINTS

- Among 104 patients with confirmed choledocholithiasis on imaging, 21.6% had no stones visible on subsequent ERCP despite stones greater than 3 mm identified on prior imaging studies.
- Patients with an intact gallbladder had a significantly higher spontaneous resolution rate of 31.5% compared to 6.1% in patients with prior cholecystectomy, with intact gallbladder status as an independent predictor (OR 7.1, 95% CI 1.5–33.3,  $p=0.013$ ).
- Stone size, number of calculi, common bile duct ectasia, intrahepatic bile duct dilation, and presence of peri-diverticular papillae did not associate with spontaneous resolution.
- The median time to ERCP was similar between patients with and without stones on endoscopy (12 versus 15 weeks,  $p=0.821$ ).
- The authors suggest their findings support a conservative approach in patients with intact gallbladders, such as performing endoscopic ultrasonography immediately before ERCP to identify patients who may not require intervention.

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