

LONG-TERM RESULTS OF ENDOSCOPIC MANAGEMENT OF BILE DUCT INJURIES AFTER LAPAROSCOPIC CHOLECYSTECTOMY

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Poster

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Retrospective evaluation of endoscopic biliary stenting for postcholecystectomy bile duct stenosis reports high technical success with stent placement and no procedure-related mortality in a series managed with prolonged stenting and regular exchanges.

KEY POINTS

- Seventy-nine patients with biliary stenosis following laparoscopic cholecystectomy were treated with endoscopic stent insertion (one to five stents, average 12 months duration, exchanged every three months).
- Endoscopic treatment was interrupted in three patients, and stricture relapse occurred in nine patients.
- Early complications occurred in three patients (one perforation, one cholangitis, one stent migration), and stent occlusion requiring early exchange occurred in six patients.
- The authors conclude that ERCP is a safe and feasible therapy and recommend it as an initial step in diagnosis and treatment of postcholecystectomy complications.

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