

ASPIRATION PNEUMONIA AFTER ERCP IN DEEP SEDATION: PREVALENCE, RISK FACTORS AND CLINICAL OUTCOMES OF AN UNDERESTIMATED COMPLICATION

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Poster

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A retrospective study of 1,140 ERCPs found that post-ERCP aspiration pneumonia occurred in 2.7% of patients and was independently associated with 30-day mortality and prolonged hospital stay.

KEY POINTS

- High ASA score, active cholangitis before ERCP, and performing EUS and ERCP in the same sedation session were significantly associated with increased risk of aspiration pneumonia in both univariable and multivariable analysis.
- Post-ERCP aspiration pneumonia was an independent risk factor for both 30-day mortality and prolonged hospital stay.
- The study evaluated 1,140 consecutive ERCPs performed under anesthesiologist-administered sedation at a single center between April 2022 and August 2024, with mean patient age of 68 years and malignant biliary stricture as the main indication.
- The authors suggest that preventive medical or anesthesiological strategies might be considered in high-risk patients, though they note that prospective studies are needed to confirm these findings.

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