

USE OF FULLY COVERED SELF-EXPANDABLE METAL STENTS AS PRIMARY THERAPY FOR IMMEDIATE POST-SPHINCTEROTOMY BLEEDING

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Poster

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A retrospective cohort study of 52 patients found that fully covered self-expandable metal stents achieved 100% technical and clinical success in controlling intra-procedural post-sphincterotomy bleeding during ERCP when used as primary therapy.

KEY POINTS

- Technical success and clinical success for bleeding control were both 100% in 52 consecutive patients treated with FCSEMS as primary therapy for active post-sphincterotomy bleeding
- Bleeding recurred in 4 patients (7.7%) within 7 days; 3 underwent repeat ERCP and 1 received a second FCSEMS, with no deaths or need for surgery or interventional radiology
- FCSEMS migration occurred in 13 patients (25%) at the time of scheduled removal
- The cohort included patients with a median age of 73 years, 21.2% taking anticoagulants and 23.1% taking antiplatelet agents, with lithiasis as the main ERCP indication in 80.8%
- This material is relevant for endoscopists managing post-sphincterotomy bleeding and institutions developing protocols for ERCP bleeding complications

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