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Summary

ENDOSCOPIC MANAGEMENT OF BILIOPANCREATIC ADVERSE EVENTS AFTER PANCREATICODUODENECTOMY

Marcello Cintolo

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Hepatobiliary

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A retrospective tertiary-center study of 129 patients found that ERCP using a pediatric colonoscope achieved 100% technical success and 93.8% clinical success for biliopancreatic complications after pancreaticoduodenectomy.

KEY POINTS

- In 315 ERCP procedures across 129 patients with post-pancreaticoduodenectomy complications, a 3.8 mm working channel pediatric colonoscope achieved 100% cannulation success.
- The most common indications were biliary complications in 60.4% of patients (anastomotic strictures, dehiscence, stones) and pancreatic complications in 30.2% (strictures and dehiscence).
- Among 78 patients treated with pediatric colonoscope, clinical success was achieved retrograde in 83.3% and with anterograde EUS-guided approaches in 16.6%, for an overall clinical success of 93.8%.
- Adverse events occurred in 8 patients: 4 had recurrent acute cholangitis and 4 required rescue treatment with PTBD or surgery.
- The authors conclude that endoscopic treatment for post-PD complications achieves high success rates in tertiary centers with expertise in ERCP for surgically altered anatomy.

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