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Summary

Call a friend: The role of interventional radiology in the management of surgical complications

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Postgraduate Teaching Programme Barcelona 2026 | Presentation

Surgery | Radiology & Imaging | Endoscopy

October 17, 2026

Interventional radiology provides minimally invasive solutions for managing post-surgical complications including abscesses, bile leaks, bleeding, and ureteric injuries when repeat surgery is not optimal.

KEY POINTS

- IR techniques include percutaneous drainage under local anaesthesia, arterial embolisation for bleeding, biliary and ureteric stent placement, and IVC filter insertion, using imaging guidance with CT, ultrasound, MRI, or DSA.
- The speaker presented a case of bile leak after Whipple's procedure in a 36-year-old female requiring multiple percutaneous drains and biliary access with drainage to bowel, with the drain remaining for six months.
- A case of post-hepatectomy pseudoaneurysm with concurrent DVT was managed by placing an IVC filter to prevent pulmonary embolism followed by selective coil embolisation of the right hepatic artery pseudoaneurysm.
- Ureteric injury after hysterectomy was treated with antegrade ureteric stent placement after retrograde urological approach failed, with the stent left in place to allow healing.
- The speaker recommends that IR services should be included in all tertiary care centres performing significant surgical procedures.
- The speaker stated in discussion that 24-hour IR coverage is very important for centres wanting to accept more complex surgical cases.

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