ENDOBILIARY RADIOFREQUENCY ABLATION FOR MALIGNANT BILIARY OBSTRUCTION DUE TO PERIHILAR CHOLANGIOCARCINOMA (RACCOON-P): A PROSPECTIVE PILOT STUDY

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A prospective pilot study of 10 patients with inoperable perihilar cholangiocarcinoma found that endobiliary radiofrequency ablation before uncovered self-expanding metal stent placement was technically and clinically successful in all cases with low rates of serious adverse events.

KEY POINTS

- The procedure achieved 100% technical and clinical success in all 10 patients with inoperable perihilar cholangiocarcinoma.
- One patient experienced self-limiting bleeding requiring admission; no other serious adverse events occurred within 30 days.
- Seven patients had mild transient abdominal discomfort treated with oral analgesics, with median pain score of 2 on a numeric rating scale and median duration of 1 day.
- Stent patency rate at 6 months was 67% (6 of 9 patients), with 7 patients experiencing recurrent biliary obstruction after a median of 6 months due to tumor ingrowth or sludge.
- The authors conclude that the study confirms safety and feasibility of endobiliary radiofrequency ablation in perihilar cholangiocarcinoma and recommend randomised controlled trials to assess efficacy.

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