

LONG-TERM OUTCOMES OF A LONG, PARTIALLY COVERED METAL STENT FOR EUS-GUIDED HEPATICOGASTROSTOMY IN PATIENTS WITH MALIGNANT BILIARY OBSTRUCTION

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Poster

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A retrospective multicenter study of 198 patients found that EUS-guided hepaticogastrostomy using partially covered metallic stents achieved long-term biliary drainage with a recurrent obstruction rate of 17.7% and median stent patency of 448 days in unresectable malignant biliary obstruction.

KEY POINTS

- The study evaluated 198 patients across 3 academic centers from January 2010 to January 2022 who underwent EUS-HGS after ERCP failure, most commonly due to duodenal obstruction (30.9%) or failed biliary cannulation (30.4%).
- Median overall survival was 3.1 months, with 65.2% of patients metastatic at the time of HGS and pancreatic cancer accounting for 47.6% of cases.
- Recurrent biliary obstruction occurred in 35 of 198 patients (17.7%) with median stent patency of 448 days; younger age was the only factor associated with higher stent dysfunction risk on multivariate analysis.
- Reintervention through the EUS-HGS route was technically possible in most cases when stent dysfunction occurred.
- The authors concluded that patient prognosis was primarily determined by the underlying malignancy rather than the drainage procedure.

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