

EUS-GUIDED BILIARY DRAINAGE IN THE MANAGEMENT OF MALIGNANT BILIARY OBSTRUCTION: EXPERIENCE AND LEARNING CURVE IN ALGERIAN TERTIARY CENTER

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Poster

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A single-center retrospective analysis of 53 patients with malignant biliary obstruction treated by EUS-guided hepaticogastrostomy between 2023 and 2025 showed 91% clinical success at 30 days but persistent high morbidity despite improvements with experience.

KEY POINTS

- Clinical success was achieved in 91% of patients with available 30-day follow-up, but procedure-related morbidity remained 20% and mortality 7% at one month.
- Learning curve analysis using cumulative sum methods showed procedure time decreased after 24 cases and adverse events stabilized at 30 cases, with early complications improving from 32% to 23% between learning phases.
- Recurrent biliary stent occlusion was the main cause for endoscopic reintervention, occurring in 13.2% of patients.
- The authors conclude that the overall morbidity rate remains high despite improvement over time, emphasizing the importance of dedicated expertise, appropriate patient selection, and multidisciplinary discussion.
- This material is most relevant to advanced endoscopists and multidisciplinary teams managing patients with malignant biliary obstruction when ERCP is not feasible.

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