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Summary

EARLY NEEDLE KNIFE FISTULOTOMY IS SAFE AND EFFECTIVE

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Hepatobiliary

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A single-operator ten-year study of 289 ERCPs found that early needle knife fistulotomy achieved 93.8% cumulative biliary cannulation with a 3.1% complication rate.

KEY POINTS

- Early needle knife fistulotomy achieved 88.9% first-attempt biliary cannulation, rising to 93.8% after re-attempt in selected cases; primary needle knife fistulotomy (16 cases) achieved 100% success with no complications.
- Success rates varied by papillary morphology: 95% for protruding papillas, 89% for creased/ridge papillas, 81.3% for regular papillas, and 66.7% for papillas within a diverticulum.
- Overall complication rate was 3.1%, comprising 2.4% pancreatitis, 0.3% bleeding, 0.3% perforation managed endoscopically, and 0.3% mortality from severe pancreatitis.
- Among 38 patients with pancreatic duct cannulation, those receiving pancreatic duct stents had no pancreatitis, while 5.3% without stents developed post-ERCP pancreatitis.
- The authors conclude early needle knife fistulotomy is effective and safe in experienced hands and suggest re-attempt ERCP before more invasive interventions after initial failure.

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