

ENDOSCOPIC PAPILOTOMY IN PATIENTS WITH BENIGN PAPILLARY IS ASSOCIATED TO AN INCREASED MORTALITY

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UEG Week Copenhagen 2023

Poster

Hepatobiliary

October 15, 2023

A retrospective case-control study of 92 patients with benign papillary stenosis who underwent ERCP with endoscopic papillotomy found higher mortality compared to matched controls undergoing EPT for other indications, though most deaths were not directly procedure-related.

KEY POINTS

- Patients with benign papillary stenosis had significantly higher mortality after ERCP with EPT compared to matched controls (9.8% versus 2.2%, p equals 0.030), with two of nine deaths directly attributable to procedural complications.
- Overall adverse events trended higher in the benign papillary stenosis group (20.7% versus 10.9%, p equals 0.069), including bleeding (12.0% versus 5.4%) and post-ERCP pancreatitis (10.1% versus 4.4%).
- Patients with benign papillary stenosis presented with less jaundice (14.4% versus 33.0%) and significantly lower cholestasis parameters and transaminases compared to controls.
- EPT achieved successful bile drainage in 100% of benign papillary stenosis cases versus 97.8% of controls, with no identifiable risk factors for adverse events within the benign papillary stenosis group.
- The authors conclude that further studies on the natural course of benign papillary stenosis and the role of elective EPT are needed.

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