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Summary

SAFETY OF EARLY DISCHARGE POST ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY (ERCP): A SINGLE CENTRE EXPERIENCE IN SINGAPORE

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UEG Week Vienna 2024 | Poster

Hepatobiliary

October 13, 2024

A retrospective study of 400 patients at a Singapore tertiary hospital found a 5.8% complication rate among those discharged within 16 hours after ERCP, with post-ERCP pancreatitis developing earlier than cholangitis.

KEY POINTS

- Among 400 patients discharged within 16 hours post-ERCP between January 2022 and February 2024, 23 (5.8%) developed complications: 7 (1.8%) had pancreatitis, 14 (3.5%) had cholangitis, and 1 (0.3%) had cholangiopancreatitis.
- Post-ERCP pancreatitis occurred earlier than cholangitis, with 3 of 7 pancreatitis cases presenting within 1-6 hours compared to only 2 of 14 cholangitis cases in that timeframe.
- The pancreatitis group showed female predominance (6 of 7 patients) with median age 72 years; all received 100 mg rectal diclofenac prophylactically and all but one had sphincterotomy.
- The cholangitis group had equal gender distribution (7 males, 7 females) with median age 72 years; 6 patients had concurrent cholangioscopy and 6 had diabetes mellitus.
- The authors concluded that early discharge after ERCP was safe with clear monitoring protocols and suggested that the 94.2% of patients who remained well could potentially be discharged even earlier than 16 hours.

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