FEASIBILITY AND SAFETY OF SPYGLASS DS CHOLEDOCHOSCOPE AND ENDOSCOPIC RADIOFREQUENCY ABLATION IN THE DIAGNOSIS AND TREATMENT OF UNRESECTABLE EXTRAHEPATIC CHOLANGIOCARCINOMA

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A retrospective study of 90 patients with extrahepatic bile duct obstruction found that combining Spyglass DS choledochoscopy with radiofrequency ablation in a single session for unresectable extrahepatic cholangiocarcinoma improved diagnostic sensitivity and reduced procedure numbers without increasing adverse events.

KEY POINTS

- Spyglass DS choledochoscope biopsy achieved 87.5% diagnostic sensitivity for extrahepatic cholangiocarcinoma compared to 38.9% for cell brush biopsy, a statistically significant difference.
- Performing Spyglass DS choledochoscopy and radiofrequency ablation in the same session reduced the mean number of ERCP procedures from 2.59 to 1.00 compared to conventional sequential approach.
- All patients in both groups successfully completed endoscopic radiofrequency ablation with 100% procedure success rate.
- Postoperative adverse event rates were similar between simultaneous and conventional groups at 14.7% and 14.3% respectively, with no significant difference, and bilirubin improvement was comparable between groups.

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