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Complications of endoscopic decompression in acute cholangitis

Various options for endoscopic decompression of the biliary tract in acute cholangitis have proven to be effective and affordable methods. However, it must be remembered that these operations are not always safe and all factors must be taken into account when choosing a primary treatment method.

Objective: to analyze the results of the treatment of patients with acute cholangitis undergoing primary endoscopic decompression.

Materials and methods. Over the past 6 years, 302 endoscopic interventions with cholangitis have been performed at the clinic. There were 68.6% women, 31.4% men. The age of patients ranged from 18 to 94 years, the average was 61.7 ± 11.4 years.

Results. The most common complication was acute pancreatitis –29 (9.5%) patients, including 4 patients with parapancreatitis (1.3%). Minimally invasive methods treated 3 patients who were fatal in 2.

Bleeding from the major duodenal papilla was observed in 12 (3.9%) patients. In all cases, we used endoscopic methods of hemostasis.

In 3 (1%) patients, retroduodenal perforation occurred, which in two cases was seen several hours after stenting. All patients were operated openly. Two patients died.

Findings. Complications after endoscopic interventions in acute cholangitis occur in 14.4% of cases, and the mortality after complications of these operations is 1.3 %. Therefore, you should carefully approach the choice of treatment for acute cholangitis.