

Spiral Enteroscopy ERCP in Surgically Altered Gastrointestinal Anatomy

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Abstract

INTRODUCTION: Surgically altered gastrointestinal anatomy presents considerable impediments for accessing the pancreaticobiliary tree. Performance of ERCP's in cases of Roux-en-Y anastomosis has presented particular challenges with success rates at reaching the biliary and pancreatic orifices using standard endoscopic techniques up to a maximum of 50%. A platform that had a high success rate in reaching the pancreaticobiliary tree with a high success rate for cannulation would be of significant clinical utility.

AIMS & METHODS: It is our hypothesis that spiral enteroscopy offers a stable and efficient platform for performing ERCP in Roux-en-Y patients. The aim of this retrospective study was to determine the success rate at reaching the pancreaticobiliary system and the rate of successful completion of the ERCP. 9 consecutive patients were included in the study. All patients underwent ERCP with the Olympus SIF-180 200 cm enteroscope with the 2.8 mm working channel and the Discovery SB overtube. Indication for all procedures was suspected CBD stones. All accessories were extended length from Cook or Olympus Corporation. 5 patients had general anesthesia and 4 had MAC with propofol anesthesia.

RESULTS: 5 women and 4 men underwent spiral enteroscopy ERCP. Average age was 54 years. 7 patients had gastric bypass Roux-en-Y anatomy and 2 were status post standard Roux-en-Y procedures. Average time of procedure was 65 minutes. Average time to the pancreaticobiliary orifice was 27 minutes. There was a 9/9 (100%) success rate at reaching the pancreaticobiliary small bowel junction. There was an 8/9 success rate at completing the ERCP. CBD stones were found in 6 patients and removed using sphincterotomy over a stent and basket/balloon retrieval. There were no complications of the procedures.

CONCLUSION: ERCP in Roux-en-Y patients can be challenging. Prior to recent deep enteroscopy techniques success rates at Roux-en-Y ERCP was ~50% in the most expert hands. Spiral enteroscopy ERCP is a new technique that is a highly effective platform for reaching the pancreaticobiliary orifice in Roux-en-Y patients. Spiral enteroscopy ERCP also provides excellent stability for high success rates for completion of ERCP's. Spiral enteroscopy ERCP should be considered as a first line of therapy in Roux-en-Y patients requiring ERCP.