

PANCREATIC DUCT SPHINCTEROTOMY: A VALUABLE TECHNIQUE APPLIED TO DIFFICULT COMMON BILE DUCT CANNULATION

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Significance: In certain instances, cannulating the common bile duct (CBD) remains to be a challenge to therapeutic endoscopist. Pancreatic duct sphincterotomy, a technique referred also as transpancreatic precut sphincterotomy, has been used to access difficult cannulation of CBD with an immediate success rate of 60-90%¹. The aim of this study is to present a single center's experience of such technique along with its success rate, indications and identified complications.

Methods: Eighty three patients who underwent endoscopic retrograde cholangiopancreatography using pancreatic duct sphincterotomy technique to access the CBD was retrieved from the endoscopy unit's patient's record from January 2014 to December 2018. Only 72 were retrospectively analyzed due to the unavailability of charts. Pancreatic duct sphincterotomy was used on cannulations that were deemed difficult and when initial standard technique failed.

Results: The success rate of CBD cannulation was 96.4% while failed access to CBD was only 3.6%. A periampullary diverticulum, an anatomic obstacle to sphincterotomy, was noted among 27% of successfully cannulated patients. Procedure-related complications was 18% in which bleeding (mild: 2.7%, moderate:4.1%) and pancreatitis (mild:8.3%, moderate:4.2%) were the only ones identified while 81.9% did not have any complications.

Conclusion: Pancreatic duct sphincterotomy is an effective technique for difficult bile duct cannulation with minimal mild to moderate bleeding and pancreatitis as the only procedure-related complication.

Keywords: pancreatic duct sphincterotomy, difficult bile duct cannulation, successful cannulation