

EP.TH.594

Is Laparoscopic Common bile duct exploration feasible after failed ERCP?

Mahmoud Al-Ardah¹, Rebecca Barnett², Harriet Whewell¹,
Tamsin Boyce¹, Ashraf Rasheed¹

¹Royal Gwent Hospital, ²University hospital of Wales-Cardiff

Aims: Concomitant gallstones and common bile duct stones are a common problem with no consensus on the best management approach. Our aim is to review the outcomes of laparoscopic clearance of common bile duct stones after failed ERCP.

Methods: We retrospectively studied all cases that had a failed ERCP prior to surgery in 200 cases of laparoscopic cholecystectomy with common bile duct exploration performed between 2006 and 2019.

Results: Twenty-two patients underwent a laparoscopic common bile duct exploration after failed ERCP. Seventeen of these were before 2013. Eleven (50%) of these were after at least one failed attempt at clearance. In 8 patients (32%) the duct was not accessible (failed cannulation) due to a variety of reasons. Nine patients had large and impacted stones, two patients had Mirrizi syndrome with concomitant CBD stones, 2 had multiple stones and one a missed stone discovered intra-operatively.

CBD clearance was successful in 19 patients (88%), 8 were completed by a transcystic approach and 14 by a transcholedochal approach.

Post-operative length of stay was 12 (± 10) days. 1 patient had an unplanned re-admission within 30 days. 1 patient required re-operation for bleeding. 3 patients developed recurrent stones and 1 developed a subsequent stricture. No mortalities were recorded.

Conclusions: Laparoscopic common bile duct exploration is feasible and safe as a secondary procedure after failed ERCP. New technologies and advancements in surgical techniques will continue to improve success and morbidity.

Keywords: common bile duct exploration, common bile duct clearance, ERCP, choledocholithiasis.