CO-043 - SAFETY AND EFFICACY OF PER-ORAL CHOLANGIOPANCREATOSCOPY IN ROUTINE CLINICAL PRACTICE IN A WESTERN CENTER

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Introduction: Diagnosis and treatment of biliary and pancreatic diseases is sometimes challenging. Recently, the digital single-operator cholangioscope (D-SOC) has become available, allowing direct visualization of the bile and pancreatic ducts. The aim of this study is to evaluate the diagnostic and therapeutic efficacy of cholangiopancreatoscopy and the safety of this procedure.

Methods: We prospectively evaluate all consecutive patients submitted to cholangiopancreatoscopy with the D-SOC (SpyGlass™ DS System, Boston Scientific) between June 2016 and February 2019. Procedure indication, technical success (defined as successful visualization of target lesions or successfully carrying out treatment, such as guidewire insertion or lithotripsy) and complication rate were analyzed.

Results: 32 consecutive patients (median age 71 years [38-92]; F/M=15/17) underwent 33 cholangiopancreatoscopy procedures (diagnostic/therapeutic procedures=23/11 - one exam was both diagnostic and therapeutic). In the diagnostic group, indications were indeterminate biliary or pancreatic strictures (n=17, 74%), focal bile or wirsung duct irregularity (n=5, 22%) and cholangiocarcinoma staging (n=1, 4%). All but one exam allowed visualization of target lesions, and the diagnosis according to visual findings were suggestive of malignancy in 10 exams and of benignancy in 13 exams. Targeted specimen with forceps biopsy (SpyBite, Boston Scientific) were obtained from 16 exams, allowing histological diagnosis in 15 of the cases (suggestive of malignancy n=7, suggestive of benignancy n=8, inadequate material n=1). Diagnosis from visual finding and forceps biopsy were consistent in 88% of the cases (both suggestive of malignancy n=7, both suggestive of benignancy n=7). In the therapeutic group, overall technical success rate was 82% (9/11) (laser lithotripsy n=2, electrohydraulic lithotripsy n=4, selective guidewire insertion n=3). Adverse events were observed in 5 exams (15%; abdominal pain requiring analgesia n=1, pancreatitis n=2, cholangitis n=1, suspected sealed perforation n=1).

Conclusion: Diagnostic and therapeutic procedures using D-SOC are effective and safe in routine clinical practice.