



EP 086

BILE DUCT STENOSIS IN HEPATOLITHIASIS: A DETAILED CHARACTERISTICS AND PREDICTORS FOR STONE CLEARANCE

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Background : Bile duct stricture, as well as the associated factors of clearance rate in hepatolithiasis and bile duct stricture after choledochoscopic lithotripsy and hepatectomy has not been comprehensively documented. Our aim is to identify the prognostic factors for post-operative residual stone.

Methods : Our retrospective study recruited 201 participants with hepatolithiasis and bile duct stenosis who underwent choledochoscopic lithotripsy with or without parenchyma incision and hepatic resection in Department of Hepatobiliary surgery, VietDuc University hospital, Hanoi, Vietnam from 1/2018 to 12/2020. Demographic information, clinical features, laboratory results, type of operation, bile duct stenosis characteristics (site, number, severity) were collected. Our primary endpoint was the post-operative stone clearance rate.

Results : 82.6% had one stricture site, 49.8% had a severe stricture. The stone clearance rate after CEHL was 43.2, and combined hepatectomy/parenchymal incision was 75.3%. Multiple approaches and type of intrahepatic stone are two associated factors for residual stone.

Conclusions : Choledoscopy is a valuable tool in finding gallstones and acquiring bile duct characteristics. Hepatectomy and parenchymal incision, along with choledoscopic lithotripsy, is a safe and effective method for increasing the clearance rate for hepatolithiasis and bile duct stricture. Comprehensive and aggressive treatment is needed in complicated intrahepatic stones.

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