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Laparoscopic Assisted ERCP Through Bypass Stomach For CBD Stone After Roux-en-Y Gastric Bypass: A Case Report

Byungmo LEE*1, Yoona CHUNG1, Yong Jin KIM1, Jae Serk PARK2

¹Surgery, H Plus Yangji Hospital, REPUBLIC OF KOREA ²Gastroenterology, H Plus Yangji Hospital, REPUBLIC OF KOREA

Background: A major concern after Roux-en-Y gastric bypass (RYGB), along with endoscopic surveillance is when pancreaticobiliary intervention is required. There have been various attempts including laparoscopic-assisted endoscopic retrograde cholangiopancreatography (LA-ERCP), double-balloon ERCP, endoscopic ultrasound-directed transgastric ERCP, and laparoscopic common bile duct exploration. We report a case resolved with LA-ERCP which has a higher success rate and is relatively less invasive.

Methods: Presentation of case: A 55-year-old woman presented with abdominal pain and fever for a week. She was diagnosed with cholelithiasis and choledocholithiasis in imaging studies including abdominal CT scan and magnetic resonance cholangiopancreatography (MRCP) at a different hospital. She was transferred to our institute as she had received RYGB 18 months before. On June 30th, 2021, laparoscopic cholecystectomy was performed with consecutive intraoperative ERCP. A gastrostomy was made on the antrum at the greater curvature side. The endoscope was inserted through a 15mm trocar and guided into the gastrostomy under laparoscopic view. ERCP with sphincterotomy and extraction of CBD stones was performed in the usual manner. Primary closure of the gastrostomy was done and the operation was terminated.

Results: The patient was discharged on postoperative day 5 without any complications.

Conclusions: Bariatric surgery always entails the risk of developing cholelithiasis with rapid weight loss. Cholelithiasis is an inevitable complication that can happen even with preventive measures such as the prescription of ursodeoxycholic acid (UDCA). Finding the appropriate treatment modality for accessing CBD in patients who have received RYGB can be difficult. Transgastric LA ERCP is a feasible procedure with low complication rates that can be used to treat patients who present with biliary tract disorders after RYGB. The use of transgastric LA ERCP allows endoscopic treatment and cholecystectomy to be performed in a single setting.

Corresponding Author: **Byungmo LEE** (b0molee@gmail.com)