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Intraductal ultrasonography as a local assessment before magnetic compression anastomosis for obstructed Choledocho-jejunostomy

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agnetic compression anastomosis (MCA) has been developed as a non-surgical alternative treatment for biliary obstruction; however, the precise assessment of the local condition is still difficult. Intraductal ultrasonography (IDUS) provides real-time, high-quality, cross-sectional images of the bile duct and periductal structures. A 70-yearold woman who had undergone pancreaticoduodenectomy for pancreatic head cancer suffered from obstructed choledocho-jejunostomy with no recurrent findings. Cholangiography using the percutaneous transhepatic cholangiographic drainage (PTCD) and fluoroscopy revealed complete obstruction of the upper common bile duct, and the distance of the obstruction was 7 mm. IDUS showed fibrous heterogenous hyperechoic appearance without fluid collection, vessels or foreign bodies at the site of the obstruction. We performed choledocho-jejunostomy using the MCA technique. One magnet was inserted into the obstruction of the hepatic side through the PTCD fistula.

Another was delivered endoscopically to the obstruction of the jejunal side. The two magnets were immediately attracted towards each other transmurally, and reanastomosis was confirmed seven days after starting the compression. The magnets were easily retrieved endoscopically. A 16-Fr indwelling drainage tube was placed in the duodenum through the PTCD. The internal tube removed 12 months after reanastomosis, and no MCA-related complications have been observed. In conclusion, MCA is a safe, effective, lowinvasive treatment for biliary obstruction, and IDUS is useful for the pretreatment assessment of feasibility and safety.

Speaker Biography

Hideaki Kawabata is a Clinical Gastroenterologist to the core and now Director of the Department of Kyoto Okamoto Memorial Hospital, Head of the Gastroenterological Center and Chief of the Palliative Care Team at our hospital, as well as a Specialist and Councilor in the Japanese Society of Gastroenterology and the Japan Gastroenterological Endoscopy Society and a Specialist in the Japanese Society of Internal Medicine and the Japanese Society of Gastrointestinal Cancer Screening.

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