

Endoscopic Ultrasound–Guided Transgastric Fenestration for Drainage of Peripancreatic Fluid Collections: An Initial Clinical Experience

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Background: Double-pigtail, tubular metal and novel lumen-apposing metal stents have inherent shortcomings with regard to drainage of peripancreatic fluid collection (PFC). The present study aimed to assess the feasibility and safety of the stentless drainage method endoscopic ultrasound (EUS)-guided transgastric fenestration for drainage of PFC.

Methods: We conducted a retrospective study on all consecutive patients with symptomatic PFC who underwent EUS-guided transgastric fenestration at our hospital. Technical success, procedural aspects, clinical outcomes, adverse events and follow-up observations were evaluated.

Results: The study included 15 patients (11 males; 36.5 ± 12.6 years), with nine patients defined as walled-off necrosis (WON). The mean maximum cystic diameter was 118.9 ± 56.8 mm (range, 52–220 mm). Transgastric fenestration (1.0–2.0 cm) was performed successfully in all patients (100%), and there were no procedure-related complications. The mean procedure times were 53 ± 6.8 min (range, 45–64 min) in patients with pancreatic pseudocyst (PP) and 98 min (range, 86–144 min) in patients with WON. Additional debridement was performed in 3 cases with a total number of 5 sessions. Adverse events occurred in two patients with cystic infection. The mean duration of hospitalization was 10 ± 4 days. During a follow-up period of 31.9 ± 14.6 weeks (range, 9–54 weeks), all patients achieved symptom resolution corroborated by imaging and there was no recurrence.

Conclusion: EUS-guided transgastric fenestration is effective, safe and cost-saving for drainage of PFCs. For collections attached tightly with the enteric lumen, this technique is expected to replace the placement of stents.

Biography:

De-Zhi He is a professor in the first affiliated hospital of Zheng Zhou University, China from Department of Gastroenterology. He engaged in endoscopic treatment for more than 20 years, with about 350 operations per year. His Research Fields was Endoscopic treatment of early gastrointestinal cancer (ESD), gastrointestinal stromal tumors, esophageal achalasia (POEM), esophageal varices (EVL), etc.