Endoscopic ultrasound-guided cholecystogastrostomy as an alternative biliary drainage route in malignant obstructions

An 87-year-old woman was diagnosed with ductal pancreatic adenocarcinoma associated with gastric, duodenal, and celiac trunk invasion. While undergoing palliative treatment, she had undergone placement of a biliary self-expandable metal stent (SEMS) 7 months previously. The patient was referred for a new endoscopic biliary drainage procedure because of obstruction of the previous biliary stent and worsening of her clinical condition, associated with jaundice, chills, and several episodes of fever. An ERCP approach was attempted but, owing to the severe tumor invasion of the duodenum, the ampullary region could not be accessed endoscopically. As an alternative, an EUS-guided cholecystogastrostomy was performed through a transgastric approach using an electrocautery-enhanced lumen-apposing metal stent (EC-LAMS; Hot Axios; 10 × 10 mm; Boston Scientific, Marlborough, Massachusetts, USA) in the same procedure (▶Video 1; ▶Fig. 1). In addition, a duodenal SEMS was placed to prevent further obstruction of the gastrointestinal flow in future (▶Fig. 2). Following this procedure, the patient showed clinical and laboratory improvement, with resolution of her infective symptoms.

Malignant biliary obstruction is a common complication of pancreatic adenocarcinoma, cholangioadenocarcinoma, and other tumors. Biliary drainage is necessary for the management of jaundice, cholangitis, and other debilitating symptoms, such as abdominal pain. Because endoscopic retrograde cholangiopancreatography (ERCP) drainage is not always feasible (owing to severe invasion of the bile duct and/or duodenal wall), endoscopic ultrasound-guided biliary drainage (EUS-BD) has appeared as a promising alternative [1, 2]. EUS-BD has the advantage of allowing different access routes, depending on the biliary anatomy and the level of the tumor obstruction [3, 4].
Competing interests

The authors declare that they have no conflict of interest.

The authors

Marco A. D’Assuncao, Fernando P. Marson, Saverio T. N. Armellini, Fernando L. Mota, Fernando J. S. de Oliveira, Eduardo M. A. Pereira Junior
Department of Digestive Endoscopy, Hospital Sírio-Libanês, São Paulo, Brazil

Corresponding author

Fernando Pavinato Marson, MD
Department of Digestive Endoscopy, Hospital Sírio-Libanês, Rua Dona Adma Jafet, 91, São Paulo, Brazil
marsonfp@gmail.com

References


Bibliography

Endoscopy 2021; 53: E277–E278
DOI 10.1055/a-1261-2771
ISSN 0013-726X
published online 1.10.2020
© 2020. Thieme. All rights reserved.
Georg Thieme Verlag KG, Rüdigerstraße 14, 70469 Stuttgart, Germany

ENDOSCOPY E-VIDEOS
https://eref.thieme.de/e-videos

Endoscopy E-Videos is a free access online section, reporting on interesting cases and new techniques in gastrointestinal endoscopy. All papers include a high quality video and all contributions are freely accessible online.

This section has its own submission website at https://mc.manuscriptcentral.com/e-videos

E278