Disconnected pancreatic duct syndrome (DPDS) in cases with walled-off necrosis (WON) is associated with recurrence of pancreatic fluid collection [1] and new-onset diabetes [2]. Transpapillary stent placement across disconnected pancreas has been attempted but the technical success rate of this procedure is low [3, 4]. An 82-year-old man was hospitalized for endoscopic management of DPDS. Computed tomography revealed a disconnected pancreas by the intervening WON and endoscopic retrograde pancreatography confirmed complete disconnection of the main pancreatic duct (MPD) (Fig. 1). As transpapillary stent placement across the disconnected MPD was unsuccessful, we proceeded to reconnection of the MPD using a rendezvous technique [5].

First, the distal MPD was punctured using a 19-gauge needle (EZshot3; Olympus Medical, Tokyo, Japan) under endoscopic ultrasonography (EUS) guidance (Fig. 2). Pancreatogram revealed complete obstruction of the MPD at the pancreas body and a plastic stent was inserted in a retrograde fashion into the tail of the pancreas. In the second session after fistula maturation, a guidewire was advanced through the occluded MPD, and a plastic stent was inserted into the WON cavity. In the third session, a guidewire was successfully advanced across the disconnected pancreas into the downstream MPD, and then the duodenum (Fig. 3 a). Leaving the guidewire in situ, a duodenoscope was advanced to the ampulla, and the guidewire left in the duodenum was withdrawn through the working channel in a rendezvous fashion. Subsequently, by using a double-lumen catheter (Uneven double lumen cannula; Kaneka, Osaka, Japan), a second guidewire was successfully advanced into the pancreas tail (Fig. 3 b). Finally, a 5-Fr transpapillary stent was successfully placed across the disconnected pancreas. Although short-term outcomes of WON have improved due to the development of endoscopic treatment, DPDS potentially poses long-term consequences for patients. This EUS-guided rendezvous

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approach (▶ Video 1) may be an effective treatment option that enables the reconnection of a completely disconnected MPD.

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Competing Interests

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