

Reply to Saito et al



We would like to thank Saito T and colleagues for their comments about and interest in our study about the timing of lumen-apposing metal stent (LAMS) removal during endoscopic ultrasound-guided treatment of pancreatic fluid collections (PFCs) [1]. We agree with the authors that a better understanding of which PFCs will require longer LAMS placement is needed to optimize patient care. Here are some details about our results.

The major reasons for clinical failure in the early stent removal group were either exacerbating infection despite endoscopic management or recurrent sepsis after stent removal. We also experienced adverse events (AEs) such as stent dislodgement during early necrosectomies, which resulted in clinical failure. Walled-off necrosis (WON) was associated with a lower clinical success rate in both the early stent removal group (61.5%) and the delayed stent removal group (94.6%) as compared with the pseudocyst group (85.7% and 100% respectively).

As therapeutic endoscopists who treat PFCs on a regular basis, many of us have experienced the difference between a simple collection that can be drained in one session and more complex, larger, debris-filled collections which will likely require multiple interventions [2]. In our experience, patience is key in management of this second group of patients. The inflammatory process following the initial insult in acute pancreatitis can take several weeks to resolve [3]. We believe a more conservative approach, with longer stent placement for passive drainage, can reduce the need for necrosectomies or stent replacement, both of which can cause AEs and result in clinical failure [4, 5].

Finally, we agree with our colleagues: A large prospective clinical trial is now needed to better understand which patients will benefit from longer LAMS placement. Before we move forward,

the endoscopic ultrasound community needs to standardize the definition of treatment success and refine the classification of WON to better characterize large and complex collections that will likely require multiple interventions.

Conflict of Interest

Anand Sahai is a consultant for Boston Scientific. Philippe Willems has been paid honoraries for presentations by Boston Scientific and Advanz Pharma. SP has no conflicts to declare.

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