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Percutaneous intraductal ultrasonography as a local assessment before magnetic compression anastomosis for obstructed choledocho-jejunostomy

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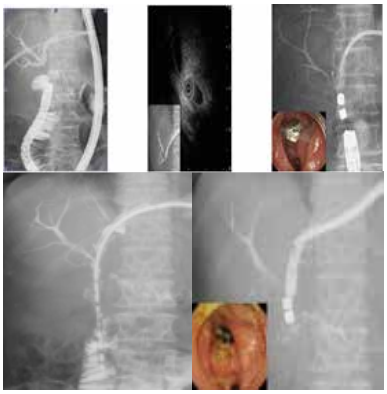

Magnetic Compression Anastomosis (MCA) has been developed as a non-surgical alternative treatment for biliary obstruction without serious complications. A 70-year-old woman who had undergone pancreaticoduodenectomy with modified Child reconstruction for pancreatic head cancer suffered from obstructed choledocho-jejunostomy with no recurrent findings four months after the operation. 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. Intraductal Ultrasonography (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 juodenum through the PTCD. The internal tube is still in place 10 months after reanastomosis, and no MCA-related complications have been observed. In conclusion, MCA is a safe, effective, low-invasive treatment for biliary obstruction, and IDUS is useful for the pretreatment assessment of feasibility and safety.

Biography

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

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