

Laparoscopic Common Bile Duct Exploration Following Prior Gastrectomy: Surgical Safety And Feasibility

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Background : Previous gastrectomy can lead to an increased incidence of biliary stones. However, Successful endoscopic retrograde cholangiopancreatography implementation after gastrectomy is still limited. In this case, laparoscopic common bile duct exploration (LCBDE) may be an alternate treatment. This study aimed to evaluate the safety and feasibility of LCBDE in patients undergone previous gastrectomy.

Methods : A retrospective analysis of patients undergone LCBDE during 2001 to 2019 was conducted. They were divided into two groups according to gastrectomy and the perioperative data were compared.

Results : The outcomes were compared in 27 patients with gastrectomy and 155 without gastrectomy who underwent LCBDE. Patients undergone gastrectomy showed longer hospitalization ($P=0.006$), more postoperative bleeding ($p=0.021$), lower incidence of preoperative ERCP ($P<0.001$), and a higher incidence of T-tube application ($p=0.002$) than those without gastrectomy. However, there were no difference of statistical significance in the estimated blood loss, operative time, bile leakage, pancreatitis, stone clearance rate, readmission and recurrence.

Conclusions : Whereas LCBDE following gastrectomy may be needed laborious management, prior gastrectomy might not impinge on efficacy and safety of LCBDE as its perioperative outcomes are comparable to those in patients without gastrectomy

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