

DUPĂ 20 DE ANI: SCHIMBAREA ROLULUI CLINIC AL COLANGIOPANCREATOGRAFIEI ENDOSCOPICE RETROGRADE

PITEL E¹, COTONEȚ A², BODRUG R²

¹Clinica Privată ”Sanatate EVP”; ²Spitalul Clinic Republican “Timofei Mosneaga”, Chișinău, Republica Moldova

Introducere: De la începutul implementării pe scară largă în practica clinică, colangiopancreatografia endoscopică retrogradă (CPGER) a devenit o tehnică diagnostică valoroasă, deși unii si-au exprimat îndoieli cu privire la fezabilitatea și rolul acesteia. CPGER a primit un impuls prin dezvoltarea aplicațiilor sale curative, în special sfincterotomie endoscopice (STE) la mijlocul anilor 1970 și stentării biliare (SB) puțin mai târziu.

Scopul lucrării a fost de a estima evoluția și rolul actual al CPGER în patologia căilor biliare.

Materiale și metode: În perioada 2011-2015, CPGER a fost efectuată la 410 pacienți cu manifestări clinice ale patologiei ducturilor biliare la Spitalul Clinic Republican. Femei au fost 249, bărbați - 161. Vârsta pacienților a variat de la 18 la 92 de ani, în medie 60,1±0,7 ani. Grupul de control a inclus 784 pacienți cărora li sa efectuat CPGER pentru patologia biliară în același spital la mijlocul anilor 1990.

Rezultate: Comparația grupurilor istoric și curent a evidențiat o scădere statistic semnificativă în cazurile de coledocolitiază (63% vs 40,9% respectiv, p<0,01), stenoza benignă a papilei Vater (14% vs 8,8%, p<0,01), sporirea practic de trei ori a patologiei maligne a ducturilor biliare sau zonei periampulare (6,1% vs 15,7%, p<0,01). La 16,8% dintre pacienții din grupul istoric, CPGER nu a evidențiat nici o patologie biliară (p<0,01 cu date din grupul curent). Proporția CPGER curative cu STE, drenaj sau SB a crescut de la 83,1% în grupul istoric la 99,3% în grupul curent (p<0,01).

Concluzii: În absența scanării cu rezonanță magnetică și computerizată, CPGER a reprezentat metoda diagnostică decisivă pentru patologia biliară 20 de ani în urmă. Scăderea proporției pacienților cu afecțiuni benigne (coledocolitiază, stricturile distale ale ductului biliar comun) trebuie explicată printr-o decizie mai precoce și mai ușoară în favoarea tratamentului chirurgical al litiazei biliare, datorită accesibilității crescute a colecistectomiei laparoscopice. Obstrucția biliară malignă este rezolvată din ce în ce mai frecvent prin metode minim-invasive, incluzând SB, asociate cu o reducere semnificativă a morbidității și mortalității.

Cuvinte cheie: obstrucție biliară, CPGER, sfincterotomie endoscopică, stentare biliară

AFTER 20 YEARS: CHANGING THE CLINICAL ROLE OF ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY

Introduction: Since the beginning of its widespread introduction into the clinical practice, endoscopic retrograde cholangiopancreatography (ERCP) has become a valuable diagnostic technique, although doubts were expressed about its feasibility and role. ERCP was given a boost by development of its therapeutic applications, notably biliary endoscopic sphincterotomy (EST) in the mid-1970s and biliary stenting (BS) a little later.

Aim of the paper was to estimate the evolution and current role of ERCP in pathology of the bile ducts.

Materials and methods: In the period of 2011-2015, ERCP were performed in 410 patients with clinical manifestations of bile ducts pathology at the Republican Clinical Hospital. Women were 249, men - 161. The age of patients ranged from 18 to 92 years, averaging 60.1±0.7 years. The control group was presented by 784 patients who had received ERCP in the same hospital in the mid-1990s, also for biliary pathology.

Results: Comparison of the historical and current groups revealed a statistically significant decrease in cases of choledocholithiasis (63% vs 40.9% respectively, p<0.01), benign stenosis of papilla Vater (14% vs 8.8%, p<0.01), and almost threefold increase in malignant pathology of the biliary ducts or the periampular zone (6.1% vs 15.7%, p<0.01). In 16.8% of patients in the historical group, ERCP did not reveal any biliary pathology (p<0.01 with data in the current group). The proportion of therapeutic ERCP accompanied by EST, drainage or BS increased from 83.1% in the historical group to 99.3% in the current group (p<0.01).

Conclusions: In absence of computed and magnetic resonance scans, ERCP was the decisive diagnostic method for biliary pathology 20 years ago. The decline in the proportion of patients with benign conditions (choledocholithiasis, distal common bile duct strictures) should be associated with an earlier and easier decision for surgical treatment of cholelithiasis, due to improved accessibility of laparoscopic cholecystectomy. Malignant biliary obstruction is increasingly resolved by mini-invasive methods, including BS, accompanied by significant reduction in morbidity and mortality.

Key words: biliary obstruction, ERCP, endoscopic sphincterotomy, biliary stenting

SCREENING METHODS FOR EARLY DETECTION OF COLORECTAL CANCERS AND POLYPS

PONEDELKOV VV, LUKYANCHUK RM

Leningrad Regional Oncology Dispensary, Saint Petersburg, Russia

Introduction: According to a report by the International Agency for Research on Cancer (IARC), in 2019 around 18.1 million new cases of cancer were recorded worldwide. In Russia due to the underdevelopment of early diagnosis, the detection of cancer often happens too late, only in the 3rd and 4th stages. In Russia the incidence of colorectal cancer is increasing. In the structure of malignant tumors, colorectal cancer is the 3rd in terms of incidence and 2nd in mortality. CRC ranks second in mortality from malignant neoplasms among men and women. Most often, CRC arises from colon adenomas, and in some cases in patients with hereditary polyposis syndromes.

Methods and materials: Screening takes place in the overall program, which includes: primary prevention (diet, lifestyle), timely examination with the use of colonoscopy (where available and corresponds to the level of the screening program) in patients with positive screening results and timely treatment (polypectomy, surgery).

Results: Modern screening centers should have devices with the maximum resolution (electronic endoscopy in HD format). For more clear details and more accurate differentiation of the tumor, virtual chromography allows to detect blood vessels and other tissue structures in the narrow-spectrum zone without the application of dyes. The zoom-endoscopy method is based on a change in the