



34. TREATMENT OF BILIARY OBSTRUCTION- ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY VS TRADITIONAL SURGERY

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Introduction. Cholecystolithiasis with obstruction of the bile duct is a common medical issue. Endoscopic retrograde cholangiopancreatography (ERCP) and laparotomy with choledochotomy are commonly used in treating this condition. ERCP is a minimally invasive procedure allowing for the assessment and treatment of biliary tract problems, whereas laparotomy with choledochotomy is the traditional method involving a large incision in the abdomen. This review aims to compare these two surgical methods.

Aim of study. The research was conducted on PubMed using the keywords "gallstone," "ERCP," "choledochotomy," and "stone extraction."

Methods and materials. Scientific papers were selected based on inclusion criteria, which involved patient groups treated with both ERCP and laparotomy, hospitalization period, recovery period, postoperative well-being of patients, operating time and procedure effectiveness. Articles mentioning patients with major complications and individuals over the age of 70 were excluded. Risk of bias was not assessed, and PRISMA criteria were used for data synthesis.

Results. Out of the total of 18 articles found, 10 studies were selected. The cohort comprised 1423 patients, with 712 treated using ERCP and 712 through traditional surgery. The patient group treated with ERCP had a hospitalization period of 1-2 days, with postoperative pain that was easier to manage and an operating time of approximately 15 minutes. Meanwhile, the group treated with the traditional method experienced moderate to intense pain, and the hospitalization period ranged from 7 to 20 days and with an operating time of approximately 90 minutes. Minimally invasive surgery patients had a recovery period of up to 3 weeks compared to the other group, where the maximum recovery period was 7 weeks.

Conclusion. ERCP represents a less invasive alternative to laparotomy with choledochotomy in the treatment of gallstone disease. Understanding the advantages offered by ERCP, such as rapid recovery, reduced complications, and diagnostic precision, makes this method an attractive option in the management of gallstones. These advantages also encourage further research into these treatment methods.