Journal of Gastroenterology, Hepatology and Endoscopy

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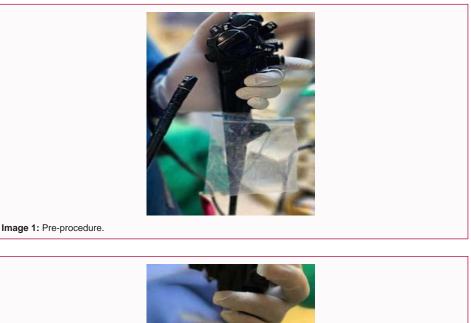
Prevention from Biliary Contamination during Endoscopic Retrograde Cholangiopancreatography: A Novel Technique

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Surgical Technique

Biliary cholangitis is a dreadful condition with high mortality. Endoscopic retrograde cholangiopancreatography is a less invasive modality leading to biliary drainage. Bile is normally sterile but in biliary cholangitis there is proliferation of bacteria. It has been reported that bile cultures are positive in 83% of cases [1] and often polymicrobial [2]. It has been observed that bile is leaked or it overflows through the biopsy/therapeutic channel of the scope during procedure. As a result, dripping of these contaminated biliary secretions on operator as well on the floor occurs. However, keeping this in mind and being part of a developing country with limited resources, we came with an idea of attaching a disposable plastic polythene bag with sealed end around the therapeutic channel (Image 1).



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Citation:

Akmal M, Rahat A, Kamani L. Prevention from Biliary Contamination during Endoscopic Retrograde Cholangiopancreatography: A Novel Technique. J Gastroenterol Hepatol Endosc. 2023; 8(1): 1112.

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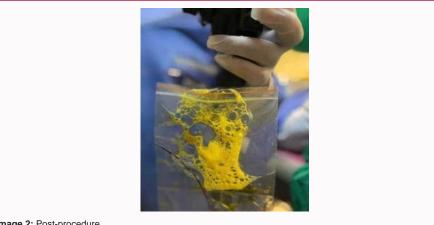


Image 2: Post-procedure.

After this technique, we noticed that all the bile remains collected into the bag (Image 2). Therefore, we suggest that a properly designed formal equipment should be made that can easily be attached to the therapeutic channels leading to safer environment and minimizing infections to endoscopists and staff.

Acknowledgment

We would like thank our technician's Mr. Tabraiz, Mr. Salman and Mr. Asif for helping us out in this novel technique.

References

- 1. Gomi H, Takada T, Hwang TL, Akazawa K, Mori R, Endo I, et al. Updated comprehensive epidemiology, microbiology, and outcomes among patients with acute cholangitis. J Hepatobiliary Pancreat Sci. 2017;24(6):310-18.
- Reuken PA, Torres D, Baier M, Löffler B, Lübbert C, Lippmann N, et al. Risk factors for multi-drug resistant pathogens and failure of empiric firstline therapy in acute cholangitis. PLoS One. 2017;12(1):e0169900.