

ASGE Guideline on the Role of Therapeutic EUS in the Management of Biliary Tract Disorders

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Definition

Therapeutic EUS has emerged as a minimally invasive field that integrates the use of novel techniques for internal, endoscopic drainage without the inconvenience and discomfort of external catheters placed percutaneously (PTBD: Percutaneous Transhepatic Biliary Drainage)

Biliary Obstruction with Failed ERCP

- For hemodynamically stable patients, EUS guided rendezvous, EUS-CDS, EUS-HGS are preferred over PTBD due to potentially higher clinical success rates, lower rate of adverse events, re-intervention, hospital length of stay, and costs
- Rating: Conditional, low*

Distal Malignant Obstruction with Failed ERCP

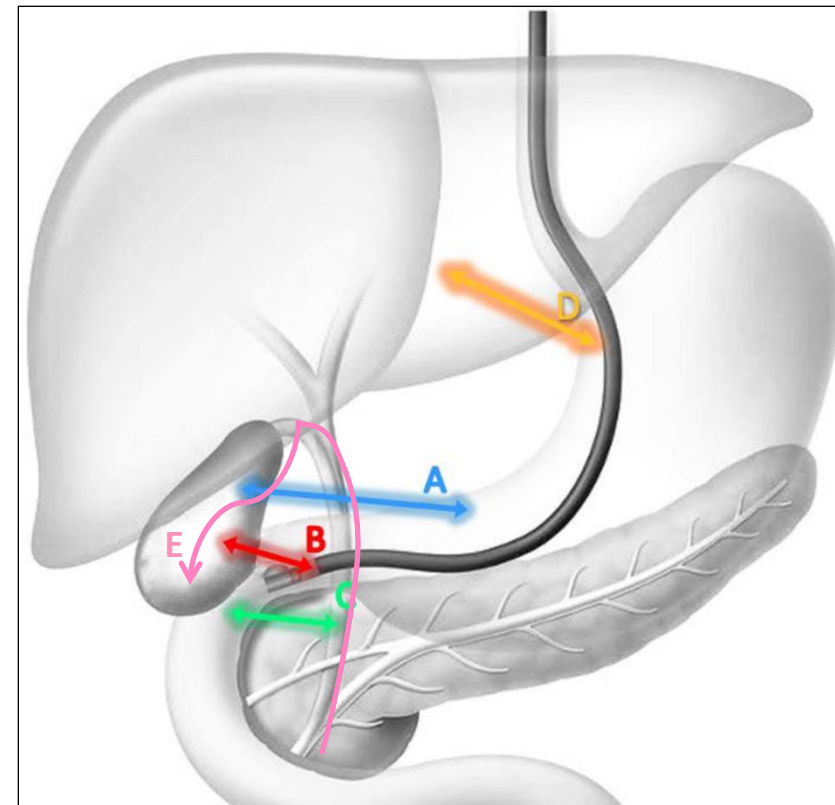
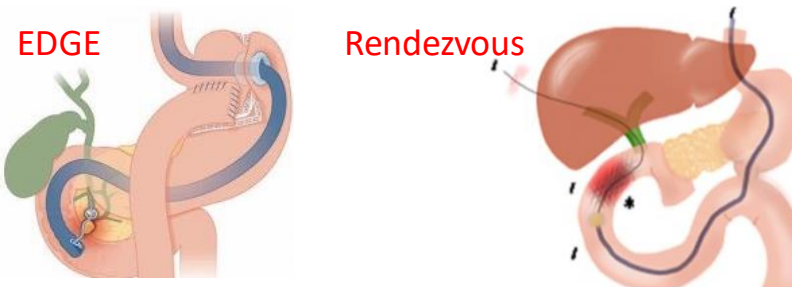
- If therapeutic EUS option chosen for drainage with gastric outlet obstruction, assuming multidisciplinary discussion completed with surgical team prior
 - Cancer Involving Stomach: EUS-CDS preferred
 - Cancer Involving Duodenum: EUS-HGS preferred
- Rating: Conditional, low*

Acute Cholecystitis

- Among non-surgical candidates without perforation, EUS-GBD is preferred over percutaneous drainage.
- EUS-GBD associated with lower risk of re-intervention, re-admission, and future need for cholecystectomy
- ET-GBD is preferred over EUS-GBD for patients who are future gallbladder surgical candidates, chronic liver disease patients with future transplant candidacy.
- Rating: Conditional, moderate*

Altered Anatomy ERCP

- Among patients with Roux-en-Y gastric bypass anatomy requiring biliary drainage, EUS guided transgastric ERCP (EDGE) is preferred over laparoscopic assisted (L-ERCP) and enteroscopy assisted ERCP (E-ERCP).
- EDGE is more favored for patients with ampullary lesions, malignant disease requiring repeat ERCP
- Among patients with Whipple, Billroth II anatomy, Roux-en-Y Hepaticojejunostomy, E-ERCP is preferred first.
- Rating: Conditional, very low*

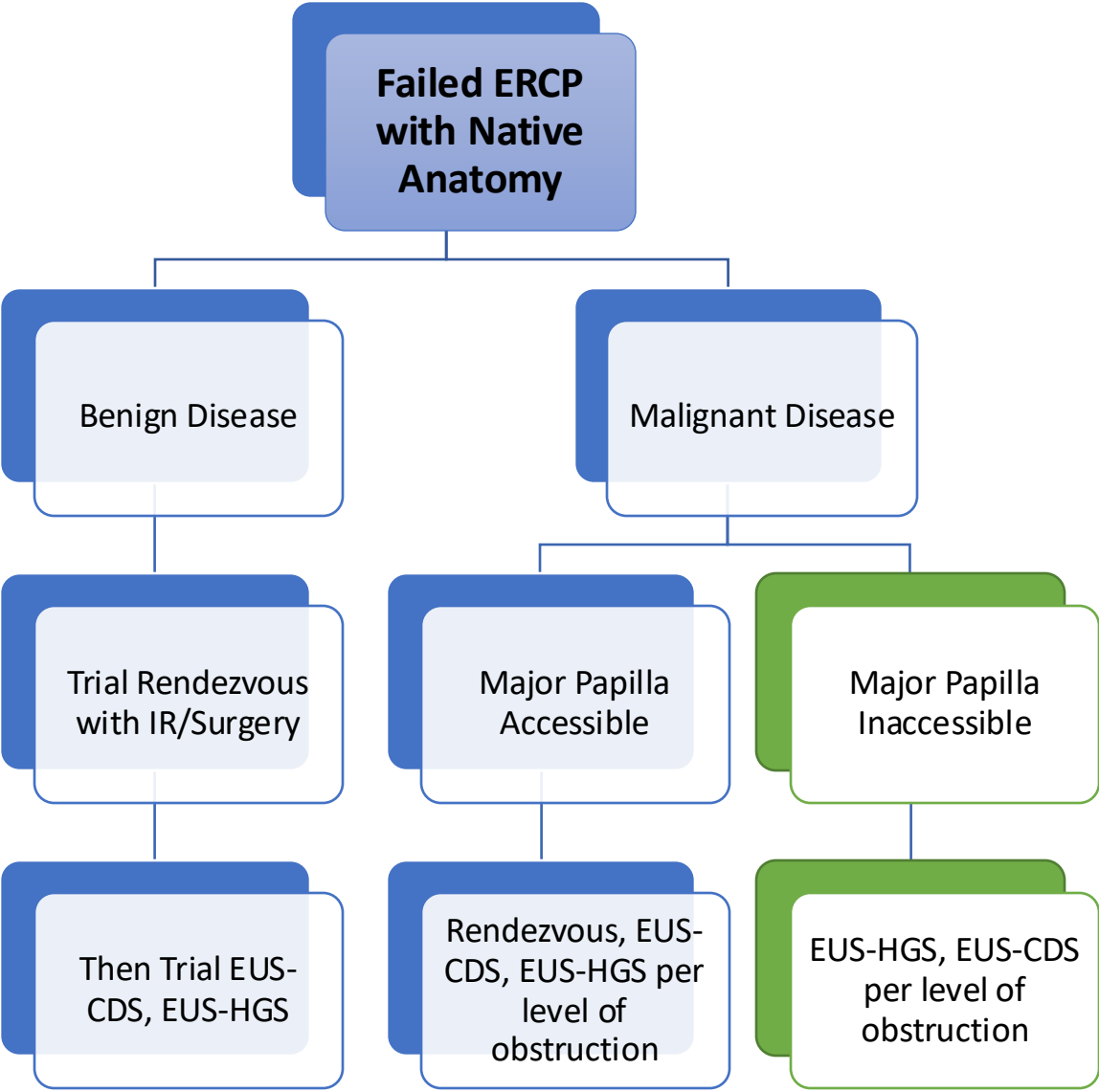


²Kahaleh M, Artifon EL, Perez-Miranda M, Gupta K, Itol T, Binmoeleer KF, Giovannini M. Endoscopic ultrasonography guided biliary drainage: Summary of consortium meeting, May 7th, 2011, Chicago. World J Gastroenterol 2013; 19(9): 1372-1379

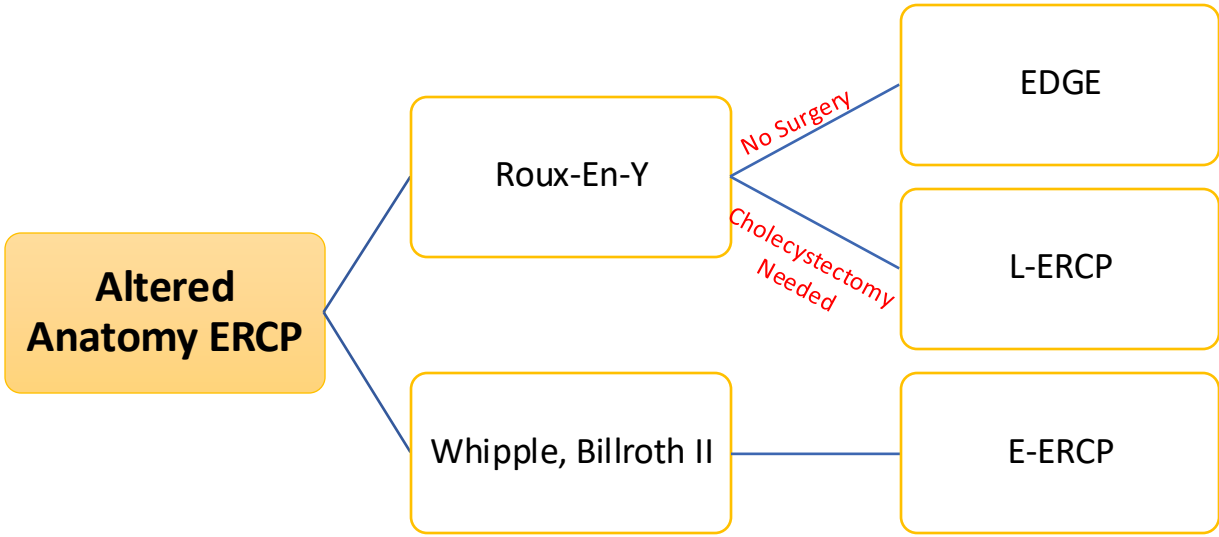
A = Cholecystogastrostomy (EUS-GBD)
B = Cholecystoduodenostomy (EUS-CDD)
C = Choledocoduodenostomy (EUS-CDS)
D = Hepaticogastrostomy (EUS-HGS)
E = Endoscopic Transpapillary Transcystic Gallbladder Drainage (ET-GBD)

Guideline Summarization on the Role of Therapeutic EUS in the Management of Biliary Tract Disorders¹

Failed ERCP with Native Anatomy



Altered Anatomy ERCP



Acute Cholecystitis

Poor Surgical Candidate

