Efficacy and Safety of EPLBD with or without Sphincterotomy in the Management of Choledocholithiasis

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Endoscopic sphincterotomy (EST) plus papillary large balloon dilation has been reported to be safe and effective in patients with large common bile duct (CBD) stones since Ersoz et al. introduced this procedure in 2003.\(^1\) This endoscopic procedure could be expected to reduce the need of mechanical lithotripsy, curtail the procedure time, and avoid the complications compared to EST in endoscopic management of large CBD stone.\(^2\)\(^-\)\(^6\)

Lately, several studies were reported in which endoscopic papillary large balloon dilation (EPLBD) alone without preceding EST was performed for management of large bile duct stones.\(^7\)\(^-\)\(^11\) EPLBD without EST may be comparable with outcomes from EPLBD with EST for the treatment of large CBD stone. However, there was not enough randomized controlled trial of both procedures yet.

Short-term outcomes of EPLBD without EST were comparable to those of EPLBD with EST in terms of success rate, rate of mechanical lithotripsy, and complications.\(^9\)\(^-\)\(^11\) Therefore, EPLBD alone without EST may be a safe and effective, simpler alternative to EPLBD with EST in patients with large CBD stones although there is little comparative data on this issue.

In conclusion, on the basis of the limited data, both EPLBD with preceding EST and EPLBD without EST may be safe and effective for the treatment of large CBD stone. And it is suggested that implementation of EST first before the procedure might be not essential to ensure safety and efficacy of EPLBD.

References

1. Ersoz G, Tekesin O, Ozutemiz AO, Gunsar F. Biliary sphincterotomy plus dilation with a large balloon for bile duct stones that are difficult to extract. Gastrointest Endosc 2003;57:156-159.