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E04lite ERCP

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This document will give you information about an ERCP. If you have any questions, you should ask your GP or other relevant health professional.

What is an ERCP?

An ERCP (endoscopic retrograde cholangio-pancreatogram) is a procedure to look for any problems in your bile duct or pancreatic duct using a flexible telescope and colourless fluid (called a contrast agent).

Gallstones in the bile duct or a narrowing of the bile duct are common problems, both of which can cause jaundice (the skin turning yellow in colour).

If the endoscopist (the person doing the ERCP) finds a problem, they may be able to treat it during the procedure.

Are there any alternatives to an ERCP?

There are other ways of looking at the bile duct, such as a scan called an MRCP, or a technique called endoscopic ultrasound. If you have a problem in your bile duct, an operation may be an alternative to an ERCP.

What does the procedure involve?

An ERCP usually takes between half an hour and three-quarters of an hour.

The endoscopist will give you a sedative to help you relax.

The endoscopist will place a flexible telescope (endoscope) into the back of your throat and down into your stomach. From here the endoscope will pass on into your duodenum (see figure 1).

The endoscope is then positioned to look at the papilla. A fine tube is placed through the endoscope and into the bile duct or pancreatic duct through the papilla. Contrast agent is injected into the ducts and x-ray pictures are taken that show the ducts. If there are gallstones in the bile duct, they can usually be removed.

The endoscopist can insert a tube called a stent to relieve jaundice caused by large gallstones or by a narrowing of the bile duct.

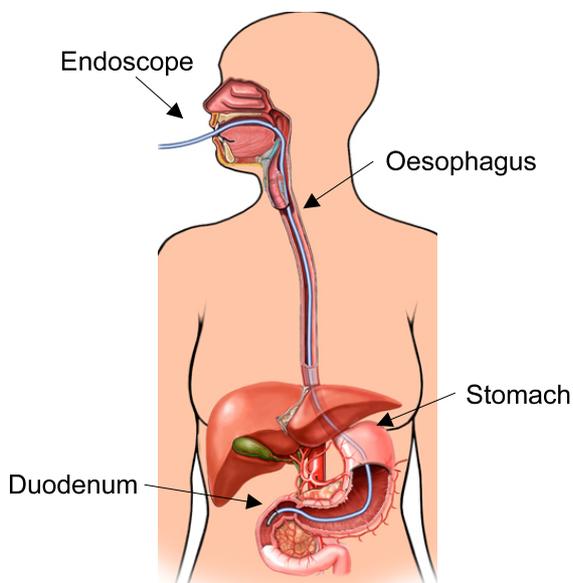


Figure 1

Endoscope in the duodenum

What complications can happen?

- Infection
- Making a hole in the oesophagus, stomach or duodenum
- Bleeding
- Damage to teeth or bridgework
- Allergic reaction
- Breathing difficulties or heart irregularities
- Inflammation of the pancreas (pancreatitis)
- Incomplete procedure

How soon will I recover?

If you were given a sedative, you will normally recover in about an hour. You may feel a bit bloated for a few hours but this will pass.

You may be able to go home the same day.

A member of the team will tell you what was found during the ERCP and will discuss with you any treatment or follow-up you need.

You should be able to go back to work two days after the ERCP.

Summary

An ERCP is usually a safe and effective way of finding out if you have a problem with your bile duct or pancreatic duct and treating your symptoms.

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