WEEKEND ERCP HAS SIMILAR OUTCOMES TO WEEKDAY PROCEDURES – DATA ANALYSIS FROM THE HUNGARIAN ERCP REGISTRY

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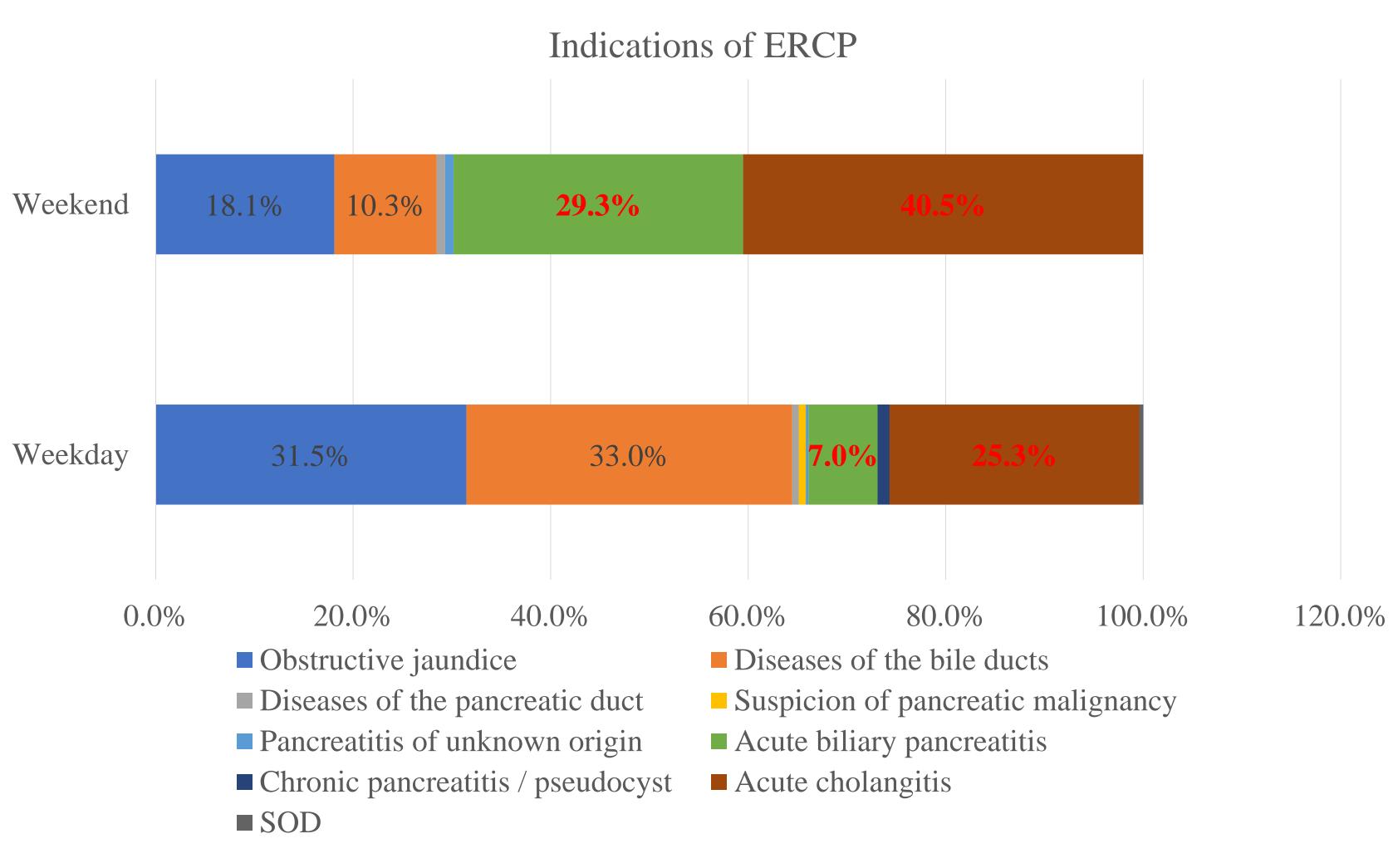
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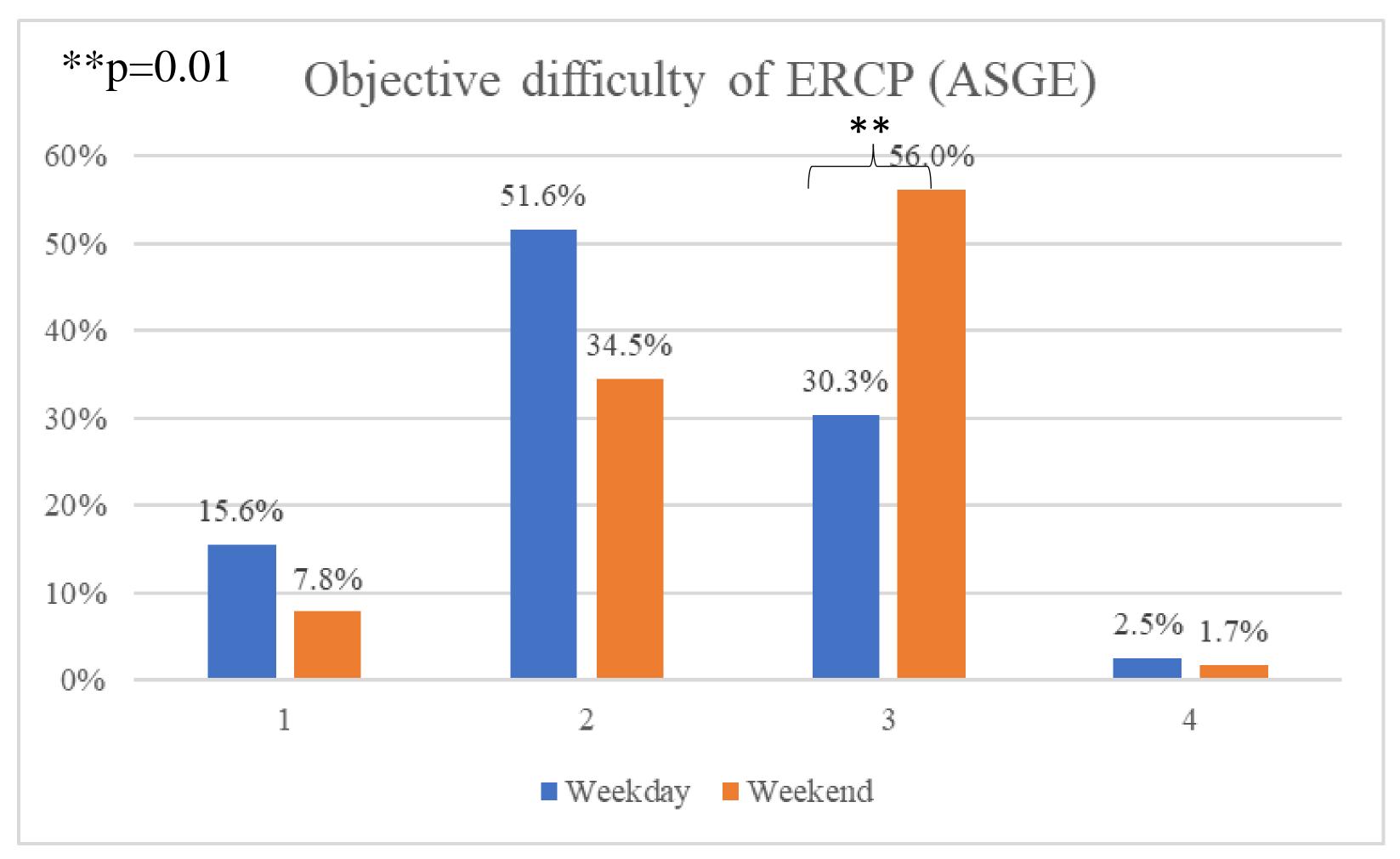
INTRODUCTION

Endoscopic retrograde cholangiopancreatography (ERCP) is essential in the minimally invasive management of biliary and pancreatic disorders. In certain indications, not delaying and carrying out ERCP during the weekend can be important to improve outcomes.

METHODS

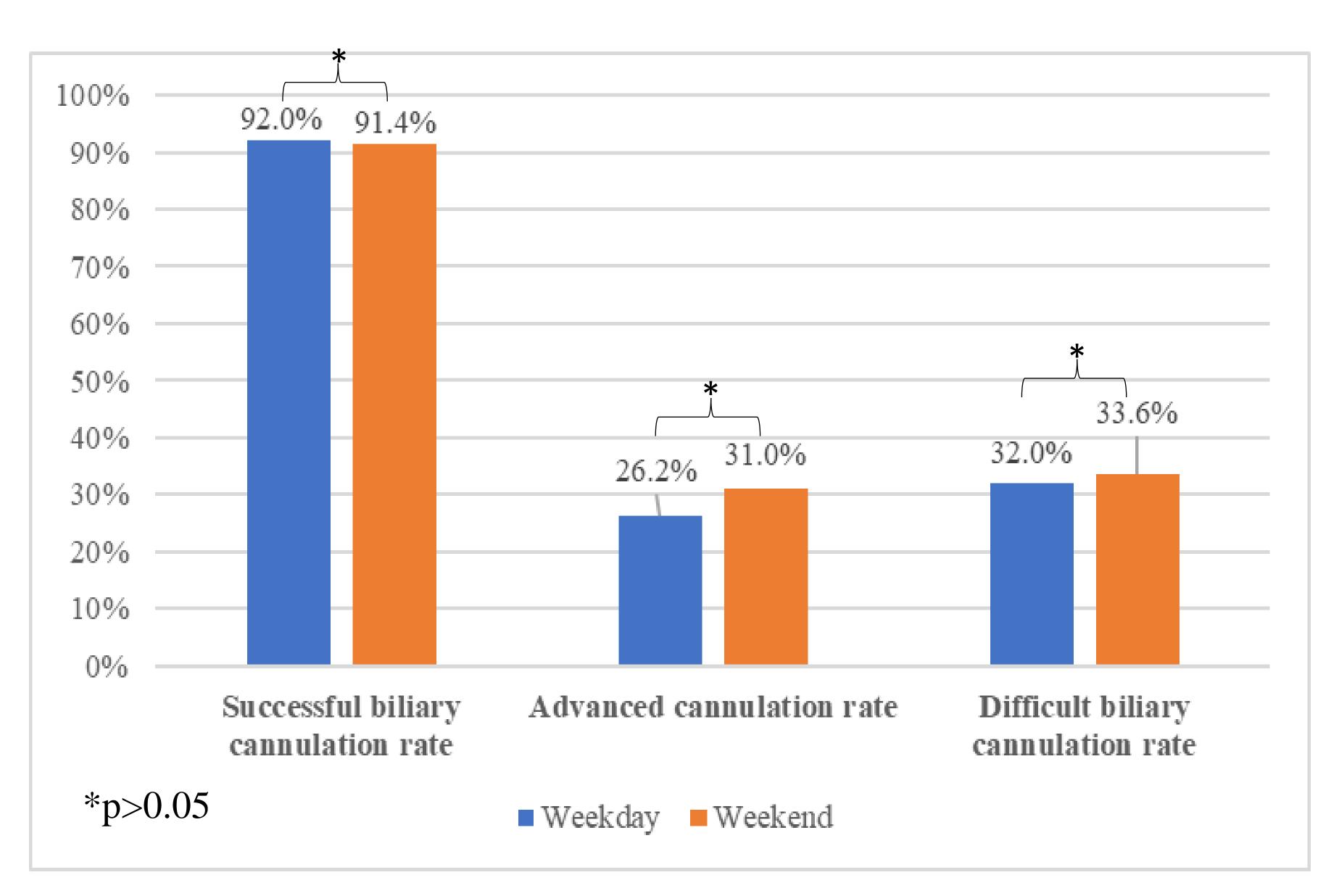
We aimed to analyze the outcomes of ERCP performed during weekends and holidays with regular weekday ERCPs. 3260 ERCP cases from 7 tertiary centers were analyzed from the Hungarian ERCP Registry database. 116 ERCPs were performed during weekends or holidays, and 3144 during weekday working hours. The main outcomes were successful biliary cannulation, difficult biliary cannulation, and adverse event rates. Chi-square and Fisher's exact tests were performed as appropriate. Propensity score matching was also performed, and the analyses were performed in the matched groups.

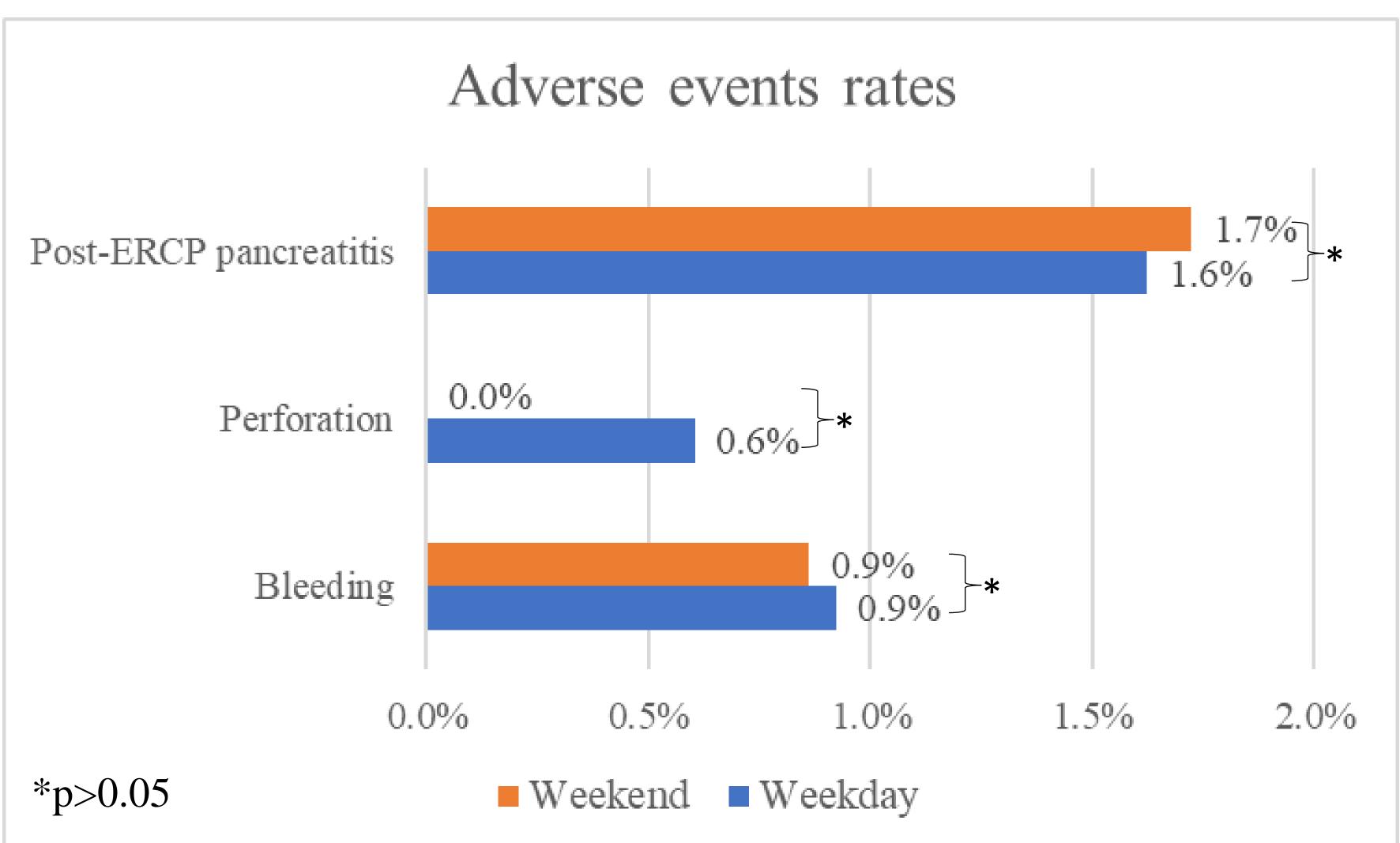




RESULTS

No difference was found between the rate of successful biliary cannulation (2891/3144, 91.95% vs. 106/116, 91.38%), difficult biliary cannulation (32.00% vs. 33.62%), and advanced cannulation method use (26.21% vs. 31.03%) (p>0.05). There was a significantly higher number of ASGE grade 3 difficulty cases when ERCP was carried out urgently (30.31% vs. 56.03%, p<0.01), but we found no increase in the number of adverse events (post-ERCP pancreatitis, bleeding, perforations) in the ERCPs carried out during weekends. There was also no significant difference detected between the propensity-matched groups in the outcomes above.





CONCLUSION

In cases of ERCPs carried out during the weekend, no difference was found regarding outcomes compared to weekday ERCPs, even though the higher number of more difficult procedures during the weekend.