Pancreatic duct decompression by EUS/ERCP rendezvous procedure – a novel intervention

**Aims**

An 86-year-old gentleman presented with acute pancreatitis, and following investigation was diagnosed with an obstructing ampullary carcinoma as the cause. He was not a suitable candidate for surgery. He suffered monthly admissions to hospital with recurrent episodes of acute pancreatitis secondary to his pancreatic duct (PD) obstruction.

Despite two attempts at PD decompression at ERCP, cannulation of the PD could not be achieved using standard ERCP techniques. To attempt to prevent his recurrent attacks of acute pancreatitis an unconventional approach using a EUS/ERCP rendezvous procedure was therefore attempted to decompress the PD.

**Methods**

Following appropriate counseling and under general anaesthesia, the linear EUS scope was placed into the patient’s stomach and the dilated PD visualised. It was punctured using a 19 gauge needle with successful placement confirmed by the aspiration of pancreatic juice. A 460cm “long ERCP wire” was placed through the needle into the PD. The wire was then manipulated along the PD and though the ampulla into the duodenum where it was captured by a snare introduced at ERCP. A pancreatic sphincterotomy was then undertaken using a standard ERCP sphincterotome and two single pigtail 5Fr plastic pancreatic duct stents were placed.

**Results**

The patient suffered some abdominal pain post procedure and required an inpatient stay of 5 days. Post procedural CT scan demonstrated successful placement of two stents in the PD. Some inflammatory change was noted in relation to the pancreas and stomach.

Following discharge this man has been well for six months and has not attended hospital, in contrast to the previous four months, in which he was admitted as an emergency with pancreatitis on four occasions.

**Conclusions**

Pancreatitis due to an obstructing tumour in patients unsuitable for surgery can be very difficult to manage particularly if the PD can not be cannulated at ERCP. This EUS/ERCP rendezvous method presents an alternative therapy for patients who are not amenable to cannulation of the PD with standard ERCP methods. Such a technique requires high levels of operator experience.