



Prospective results of pseudocyst and abscess drainage in west Sweden.

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Only a few prospective studies exist on the results of endoscopic pseudocyst drainage. The largest prospective study from a large centre showed a complication rate of 19% (Kahaleh et al, *Endoscopy*. 2006 Apr;38:355-9.). However, reports from smaller centres are lacking.

The aim:

of this study was to prospectively analyze the results and complication rate of pseudocyst drainage at our centre.

Methods:

All patients referred for endoscopic pseudocyst or abscess drainage were prospectively included. The procedures were performed by one endoscopist with long endoscopy experience.

The results:

and complication rate were recorded. Results: In a period of 32 months 14 (3 Women) patients were included. One patient had high Carcino Embryonic Antigen level and was found to have pancreatic cancer. The etiology of pancreatitis was alcohol in 7 patients; gallstone in 3, idiopathic in 2 and one patient had a postoperative abscess. The pseudocyst size ranged between 28X13cm and 5X5cm. The median number of stents used was 3. Three patients received a naso-cystic drain to lavage the cyst. The drained area was infected in 6 patients. Inspection of the cyst with a gastroscope and flushing with saline and/or necrosectomy was performed in five patients. Two patients were operated due to complications. The two patients had infected pseudocysts.

Conclusion:

Complications of pseudocyst drainage are associated with cyst infection. Our results are comparable to results from larger centres. Prospective multicentre studies are needed to expand our knowledge about complications and optimal procedure performance.