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学位論文の題名	<p>Predictive factors for pancreatitis and cholecystitis in endoscopic covered metal stenting for distal malignant biliary obstruction (切除不能悪性中下部胆道狭窄に対する covered self-expandable metallic stent 留置における膵炎、胆嚢炎の予測因子)</p> <p>Journal of Gastroenterology and Hepatology. Vol. 28:68-72. 2013</p>
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Abstract

Endoscopic biliary drainage with a covered self-expandable metal stent (SEMS) is an accepted form of palliative therapy for distal malignant biliary obstruction (MBO) because of its low invasiveness and long-term patency. A recent meta-analysis reported that stent migration, tumor overgrowth, and sludge formation were significantly higher with covered SEMSs than with uncovered SEMSs¹. Pancreatitis and cholecystitis are also major complications after SEMS placement in distal MBO. We aimed to clarify predictive factors for pancreatitis and cholecystitis after covered SEMS placement. We retrospectively reviewed 74 consecutive patients with distal MBO who underwent initial endoscopic drainage using covered SEMS. Predictive factors for pancreatitis and cholecystitis were evaluated in the 74 patients described above and in 66 patients who had not undergone cholecystectomy. The incidences of pancreatitis and cholecystitis were 10.8% (8/74) and 6.1% (4/66), respectively. Univariate analysis revealed that non-pancreatic cancer ($p = 0.018$) and contrast injection into the pancreatic duct ($p = 0.030$) were significant predictive factors for pancreatitis. Multivariate analysis revealed that non-pancreatic cancer (OR, 4.21; 95% CI, 1.63–14.18; $p = 0.007$) and contrast injection into the pancreatic duct (OR, 3.34; 95% CI, 1.33–9.60; $p = 0.016$) were significant independent predictive factors for pancreatitis. On the other hand, univariate and multivariate analyses revealed that tumor involvement to the orifice of the cystic duct (OCD) was a significant independent predictive factor for cholecystitis (OR, 5.85; 95% CI, 1.91–27.74; $p = 0.005$). Non-pancreatic cancer and contrast injection into the pancreatic duct were predictive factors for pancreatitis, and tumor involvement to the OCD was a positive predictive factor for cholecystitis after endoscopic covered SEMS placement for distal MBO.

Reference

(1) Saleem A, Leggett CL, Murad MH, Baron TH. Meta-analysis of randomized trials comparing the patency of covered and uncovered self-expandable metal stents for palliation of distal malignant bile duct obstruction. *Gastrointest Endosc.* 2011 ;74:321-327.