Endoscopic Internal Drainage is a Safe Procedure to Manage Anastomotic Leaks

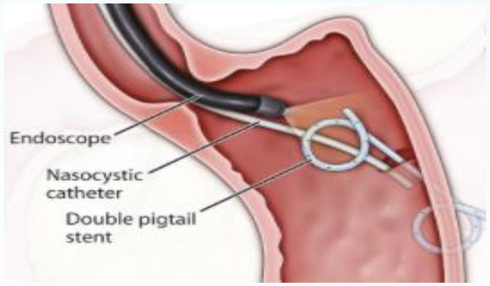
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Introduction

- Anastomotic leaks following foregut surgery pose a difficult scenario for surgeons.
- Endoscopic management of these leaks has been shown to work as a less invasive alternative to definitive surgery.
- Endoscopic Internal Drainage is an evolving treatment option.



Purpose

- The purpose of this study was to review our experience using Endoscopic Internal Drainage and to report our outcomes.

Background

- Utility of Endoscopic Internal Drainage
  - Ability to drain difficult to reach cavities with percutaneous drain.
  - Helpful for managing small perforations that lead into a cavity/abscess.
  - Offers one time placement with continued surveillance of leak control.

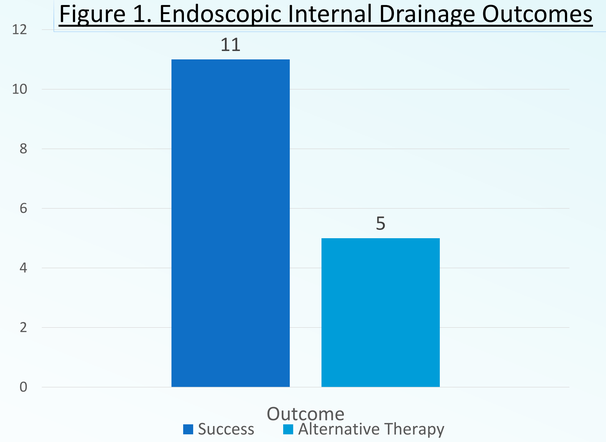
Methodology

- All patients undergoing Endoscopic Internal Drainage following esophageal and gastric leaks were gathered in a prospectively maintained IRB approved database.
- Patient demographics, sentinel operation responsible for the leak, and outcomes of therapy were collected.
- Primary endpoints included the rate of healing and complications with the drainage catheter in place.

Results

- A total of 16 patients were identified with a mean age of 48 and a mean BMI of 30.8.
- 69% of patients who underwent Endoscopic Internal Drainage had successful leak closure, while 31% required alternative therapy.
- The 5 failures required: 1 EVAC therapy, 1 esophagojejunostomy, 1 fistulojejunostomy, and 2 partial gastrectomies

Figure 1. Endoscopic Internal Drainage Outcomes



Results

- 75% of patients had a prior endoscopic therapy that failed.
- Endoscopic Internal Drainage catheters were placed for a mean of 48 days.
- For the duration of catheter placement, 4 patients were on minimal PO intake and the rest were strict NPO with other means of nutrition.
- There were no complications with the drainage catheters and no deaths reported.

Conclusion

- Leaks following esophagogastric surgery are difficult to manage; however, Endoscopic Internal Drainage has been shown to be effective.
- This study suggests that Endoscopic Internal Drainage is a safe and feasible option to heal leaks in foregut surgery.
- Duration of the technique should be 6 to 8 weeks with nutritional support guided by the comfort of the clinician.