Outcomes of Biliary Stone Disease in a Newly Established ERCP Service at a District General Hospital in the UK

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Introduction

Endoscopic retrograde cholangiopancreatography (ERCP) is a vital diagnostic and therapeutic procedure for managing obstructive biliary stone disease.

This audit evaluated a newly established ERCP service at a District General Hospital in the UK on its quality, safety, and adherence to NICE guidelines (compliance of ERCP performance within 72 hours for patients with jaundice caused by common bile duct (CBD) stones).[1]

Methods

A retrospective audit was conducted using electronic records and endoscopy logs for patients admitted with choledocholithiasis, cholangitis, or biliary pancreatitis (July 2023 – March 2024).

- Sample size: 46 patients.
- Key performance indicators:
  - Compliance with the 72-hour guideline.
  - Procedural success rates.
  - Complications.

Results

Average time to ERCP: 5.6 days (exceeding the 72-hour target).

- Inpatients: 4.8 days
- Outpatients: 6 days

42 patients (91%) had a successful ERCP (see Fig 1).
5 patients (11%) had ERCP related complications (see Fig 2). There were no deaths at 30-days follow-up.

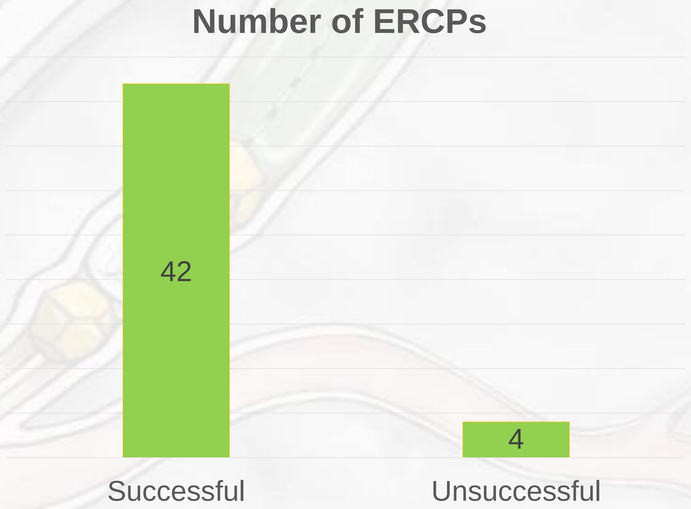


Fig 1. Number successful/unsuccessful ERCPs

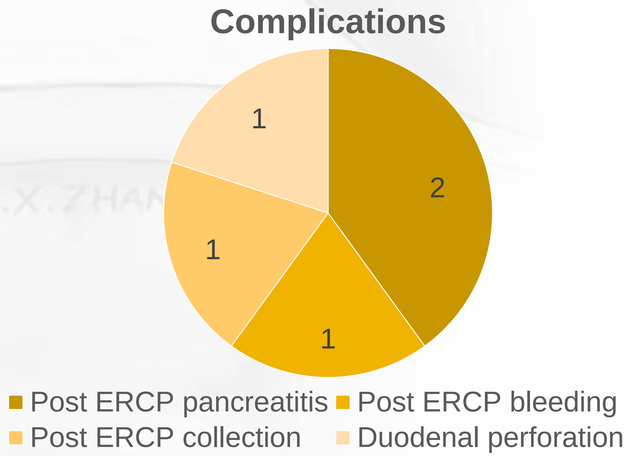


Fig 2. Complication rates

Conclusions

The new ERCP service improved access to care but failed to meet the NICE 72-hour guideline due to delays.

Recommendations:

- Introduce an electronic referral system.
- Formalize outpatient pathways for stent removal.

References
1. National Institute for Health and Care Excellence (2014). Gallstone disease: diagnosis and management [NICE Clinical Guideline No. 188]