MANAGEMENT OF DYSFUNCTIONAL BILE DUCT SECONDARY TO CHOLEDOCHOLITHIASIS IN OCTAGENARY PATIENTS WITH RECONSTRUCTION THROUGH CHOLEDOCHODUODENOSTOMY

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Objective of the study: The objective of this study is to evaluate the surgical outcomes of patients with dysfunctional bile duct secondary to choledocholithiasis not resolved by endoscopy. Additionally, it aims to determine the clinical characteristics of the patients for whom this surgical technique is chosen and the postoperative period of patients who undergo choledochoduodenostomy.

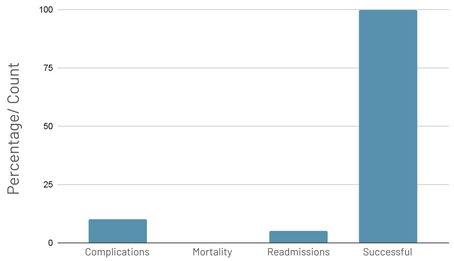
Methods and Procedures: We performed a retrospective series of elderly patients who underwent choledochoduodenostomy with a dysfunctional bile duct, defined as higher than 2 cm in our medical center (Hospital Simon Bolivar) with choledocolithiasis. We analyzed preoperative, intraoperative, and postoperative outcomes.

Results: A total of 15 patients underwent choledochoduodenostomy between 2000 and 2024. The median age was 70 years, with a male-to-female ratio of 7:8. The main symptoms are abdominal pain associated with jaundice. The average stone size was 20 mm. Intraoperative findings confirmed the presence of choledocholithiasis in all cases. The mean operative time was 90 minutes, and the mean hospital stay was 7 days. With an overall complication rate of 10% (seromes). Successful stone clearance was achieved in 100% of the cases. There were no mortalities reported during the follow-up period of 24 months. The readmission rate was 5% of patients after initial discharge.



Demographics

The median age was 70 years with a male-to-female ratio of 7:8.



Outcomes summary

Conclusión: In patients with dysfunctional bile duct with secondary choledocholithiasis who undergo choledochoduodenostomy, the procedure shown to be safe, effective and reproducible in elderly patients unfit for major surgery.

Bibliography.

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