



Original article

Outcomes of Management of Iatrogenic Injuries of the Bile Duct

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ABSTRACT

We retrospectively reviewed 16 patients with iatrogenic bile duct injuries treated at the San Pablo Hospital in Coquimbo between 1981 and 2004. Twelve of these injuries occurred at the Coquimbo Hospital and 4 patients were referred from other hospitals. 10 cases occurred during open surgery and 6 in laparoscopic surgery. Half of the lesions were detected during the intervention (8 cases). Immediate repairs were primary ductal anastomosis in 3 cases, all with poor results. In 5 cases, immediate hepatic jejunostomy (HYA) was performed with favorable long-term evolution. Of the 8 patients with a postoperative diagnosis, 6 with HYA were repaired, of which one developed stenosis; a minor injury with choledochorrhaphy and T tube and another patient with the removal of bile duct clips. In 8 of the 13 HYAs the Hutson Russell snare was used for reconstruction. In 2 cases with posterior stenosis, the loop was used for percutaneous endoscopic dilation. Surgical management of iatrogenic bile duct injuries has been successful in the vast majority of cases (81.3%). One patient (6.3%) died with combined vascular and canalicular injury, confirming the severity and poor prognosis of these injuries. We recommend the Hutson Russell loop for reconstruction, since in 2 patients it allowed us to solve the stenosis after surgical repair through percutaneous endoscopic dilation, avoiding new derivative surgeries.

Keywords: Iatrogenic bile duct injuries, Roux-en-Y anastomosis

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