

ERCP (Endoscopic retrograde Cholangiopancreatography)

ERCP is a specialized technique used to study the bile ducts, pancreatic duct and gallbladder. The drainage channels from the liver are called bile ducts. The pancreatic duct is the drainage channel for the pancreatic juice from the pancreas into the part of small intestines called duodenum.

How is it performed?

During ERCP, your doctor will pass a hollow, soft and flexible tube that carries light sources (endoscope) through your mouth, esophagus and stomach into the duodenum. An endoscope is a thin, flexible tube that lets your doctor see inside your bowels. After your doctor sees the common opening to the ducts from the liver and pancreas, your doctor will pass a narrow plastic tube called a catheter through the endoscope and into the ducts. Your doctor will inject a contrast material (dye) into the pancreatic or biliary ducts and will take X-rays

What preparation is required?

To make sure that you have an empty stomach, you will need to fast for at least six hours (and preferably overnight) before the procedure. This is necessary for the best examination. Your doctor or one of the clinical staff will give you instructions about how to prepare. Although any drug allergy doesn't prevent you from having ERCP, it's important to discuss any drug allergies you may have with your doctor prior to the procedure and you may require specific allergy medications before the ERCP.

You must inform your doctor about all the medications you are taking, particularly aspirin products, arthritis medications, anticoagulants (blood thinners, such as warfarin or heparin), clopidogrel or insulin. Also, be sure to tell your doctor if you have heart or lung conditions or other major diseases which might prevent or impact the decision to conduct endoscopy.

What can I expect?

Some patients also receive antibiotics before the procedure due to certain conditions they may have. Your doctor might apply a local anesthetic to your throat and/or give you a sedative to make you more comfortable. Your doctor might even ask an anesthesiologist to administer sedation if your procedure is complex or lengthy. You will lie on your abdomen on an X-ray table. You might feel a bloating sensation because of the air introduced through the instrument but the instrument does not interfere with breathing in any way.

What are possible complications?

ERCP is a well-tolerated procedure when performed by doctors who are specially trained and experienced in the technique. Although rare, some complications requiring hospitalization can occur. These include pancreatitis (inflammation of the pancreas), infections, bowel perforation and bleeding. Some patients can have an adverse reaction to the sedative used. Sometimes the procedure may have to be terminated without completion due to technical reasons. Your doctor will discuss the complication before the procedure.

What can I expect after ERCP?

If you have ERCP as an outpatient, you will be observed for complications until most of the effects of the medications have worn off before being sent home. You might experience bloating or pass gas because of the air introduced during the examination. You can resume your usual diet unless you are instructed otherwise.

You must not drive after the procedure because of the sedatives used during the examination and someone must drive you home. Even if you feel alert after the procedure, the sedatives can affect your judgment and reflexes for the rest of the day.

For more information visit [ASGE](#) (link below)

<http://www.asge.org/patients/patients.aspx?id=386>

IMPORTANT DISCLAIMER

This information is intended to provide general guidance only and is not a definitive medical advice. You MUST consult one of our expert doctors regarding your condition, procedure and prep for the procedure for a definitive opinion. Please call and make an appointment at (914)683-1555