

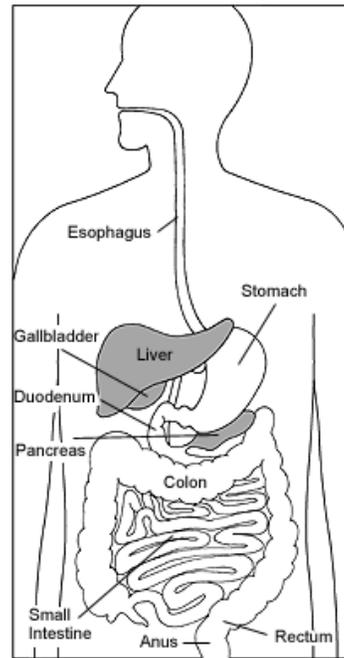
What is an ERCP?

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ERCP is an abbreviation for **Endoscopic Retrograde Cholangiopancreatography** (en-doh-SKAH-pik REH-troh-grayd koh-LAN-jee-oh-PANG-kree-uh-TAH-gruh-fee). This is a procedure that enables your doctor to diagnose problems in the liver, gallbladder, bile ducts, and pancreas.

The liver is a large organ that, among other things, makes a liquid called bile that helps with digestion. The gallbladder is a small, pear-shaped organ that stores bile until it is needed for digestion. The bile ducts are tubes that carry bile from the liver to the gallbladder and small intestine. These ducts are sometimes called the biliary tree. The pancreas is a large gland that produces chemicals and hormones such as insulin that help with digestion.

ERCP is used primarily to diagnose and treat conditions of the bile ducts including gallstones, inflammatory strictures (scars), leaks (from trauma and surgery), and cancer. ERCP combines the use of x-rays and an endoscope, which is a long, flexible, lighted tube. Through the endoscope, the physician can see the inside of the stomach and duodenum (upper part of the small intestine), and inject dye into the ducts in the biliary tree and pancreas so they can be seen on x-rays.



Source: National Digestive Diseases Clearinghouse @ <http://digestive.niddk.nih.gov>

How do I prepare for this procedure?

- Your stomach and duodenum must be empty for the procedure to be accurate and safe.
- You will not be able to eat or drink anything after midnight the night before, or for 6 to 8 hours on the day of the procedure before it is started, depending on the time that you are scheduled.
- Your doctor will need to know whether you have any allergies to contrast dye or medium, which is used during the exam.
- **For female patients, if there is any chance you may be pregnant, it is important to let your doctor know this before the procedure is scheduled.**

If you are having this procedure as an outpatient, you must arrange for someone to take you home. You will not be allowed to drive because a sedative is given during the procedure

How is the procedure performed?

- You will lie on your stomach on an examining table in one of the GI procedure rooms.
- You will be given a sedative intravenously to help you to relax.
- The physician will then guide the scope through your mouth, esophagus, stomach, and duodenum until it reaches the spot where the bile ducts open into the duodenum.
- The physician will pass a small plastic tube through the scope. Through the tube, the physician will inject a dye into the ducts to make them show up clearly on x-rays. X-rays are taken as soon as the dye is injected.
- If the exam shows a gallstone or narrowing of the ducts, the physician can insert instruments into the scope to remove or relieve the obstruction and dilate, or open, the narrowing. Also, tissue samples (biopsies) can be taken for further testing.

How long does the procedure take and will I need to stay in the hospital?

The ERCP takes from 30 minutes to 2 hours. After the procedure, you may need to stay at the hospital for 1 to 2 hours until the sedative wears off. If any kind of treatment is done during the ERCP, such as removing a gallstone, you may need to stay in the hospital overnight for observation.

Are there any complications related to the ERCP?

Possible complications of ERCP include:

- Pancreatitis, or inflammation of the pancreas
- Infection
- Rupture and bleeding of the duodenum (rare)

If you are sedated for the procedure and you are having the test done as an outpatient, you must have a family member or friend available to drive you home.

Source: National Digestive Diseases Clearinghouse. Retrieved 04/2007, from <http://digestive.niddk.nih.gov>

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