



PO-006

Choledochoplasty With Gastric Flap For The Case Of Bile Duct Stricture

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Background : Roux-en-Y hepaticojejunostomy (RYHJ) is usually used to treat benign strictures of hilar bile ducts. However, RYHJ might also induce ascending cholangitis and recurrent hepatolithiasis. Here in, we introduced the case using vascularized stomach flap for the reconstruction of bile duct

Methods : *case presentation & operation* Initially, a 79 year old male patient, who has no prior medical history, was diagnosed with common bile duct stone, underwent cholecystectomy, stone removal with T-tube choledochostomy operation. (discharged uneventfully POD#10) After 3 year, he suffered RUQ pain and diagnosed with recurrent common bile duct stone and also cecal cancer. ERCP failed and CBD stone removal and choledochoplasty with gastric flap was performed. Right hemicolectomy was performed simultaneously for cecal cancer and pathology was T3N1. (FOLFOX CTx. 12th)

Results : *operation findings & postoperative course & radiologic findings* After second operation, he discharged uneventfully and radiologic findings were normal at 1weeks, 3weeks and 3months. After 2 year, he readmitted due to recurrent CBD stone and at this time ERCP succeeded.

Conclusions : Choledochoplasty with gastric flap is a feasible procedure. It has the advantages of technical simplicity, primary mucosal coverage, lasting elasticity and minimal risk for stricture formation.

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