

## Endoscopic Ultrasound-Guided Drainage of Pancreatic Fluid Collections Using AXIOS™ Electrocautery Enhanced Delivery System: A Retrospective Experience at a Large Quaternary Care Center

Michal Kloska MD, PhD  
*Lehigh Valley Health Network, Michal.Kloska@lvhn.org*

Valery Hrad MD  
*Lehigh Valley Health Network, Valery.Hrad@lvhn.org*

Soorya N. Aggarwal DO  
*Lehigh Valley Health Network, Soorya.Aggarwal@lvhn.org*

Shashin Shah MD  
*Lehigh Valley Health Network, Shashin.Shah@lvhn.org*

Zachary Zator MD  
*Zachary.Zator@lvhn.org, zachary.zator@lvhn.org*

*See next page for additional authors*

Follow this and additional works at: <https://scholarlyworks.lvhn.org/medicine>



Part of the [Gastroenterology Commons](#), and the [Internal Medicine Commons](#)

---

### Published In/Presented At

Kloska, M. Hrad, V. Aggarwal, S. Shah, S. Zator, Z. Shah, H. N., (2019, October 27-30). *Endoscopic Ultrasound-Guided Drainage of Pancreatic Fluid Collections Using AXIOS™ Electrocautery Enhanced Delivery System: A Retrospective Experience at a Large Quaternary Care Center*. Poster Presented at: American College of Gastroenterology Annual Scientific Meeting, San Antonio, TX.

This Poster is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact [LibraryServices@lvhn.org](mailto:LibraryServices@lvhn.org).

---

**Authors**

Michal Kloska MD, PhD; Valery Hrad MD; Soorya N. Aggarwal DO; Shashin Shah MD; Zachary Zator MD; and Hiral N. Shah MD

# Endoscopic Ultrasound-Guided Drainage of Pancreatic Fluid Collections Using AXIOS™ Electrocautery Enhanced Delivery System: A Retrospective Experience at a Large Quaternary Care Center

Michal Kloska, MD, PhD, Valery Hrad, MD, Soorya Aggarwal, DO, Shashin Shah, MD, Zachary Zator, MD, Hiral N. Shah, MD  
Lehigh Valley Health Network, Allentown, Pa.

## Introduction

Pancreatic fluid collections (PFC) are common complications of acute pancreatitis, surgery or trauma. Many reabsorb spontaneously but the remainder create cystic structures filled with fluid or with necrotic debris. Since the development of lumen apposing metal stents (LAMS), EUS-guided drainage has become the first line treatment of PFC.

## Aim

To report and discuss the clinical outcome data from EUS-guided drainage of PFCs using AXIOS LAMS at a Large Quaternary Care center.

## Methods

An IRB approved, retrospective chart review was performed on EUS-guided drainage of PFCs using AXIOS LAMS conducted at a large quaternary care, teaching hospital.

## Results

A total of 43 AXIOS LAMS were used in the treatment of pancreatic pseudocysts (PP, 41.9%) and walled off pancreatic necrosis (WOPN, 58.1%). LAMS were placed successfully in 100% of procedures. Of these, 5 patients also had double pigtailed plastic stent placement through the LAMS. 25.6% of patients required repeat endoscopic intervention; most were limited to necrosectomy and/or wash outs. Notably only two repeat endoscopic interventions were related to adverse events (stent dislocation, stent occlusion). Overall adverse events occurred in 16.3% of interventions, in 5 patients with WOPN, and 2 patients with PP. Subsequent surgical resection was needed in only 2 patients (4.8%). Average hospital stay after procedure was 6.79 days (median of 3 days) and LAMS were ultimately removed on average of 24.68 days.

## Discussion

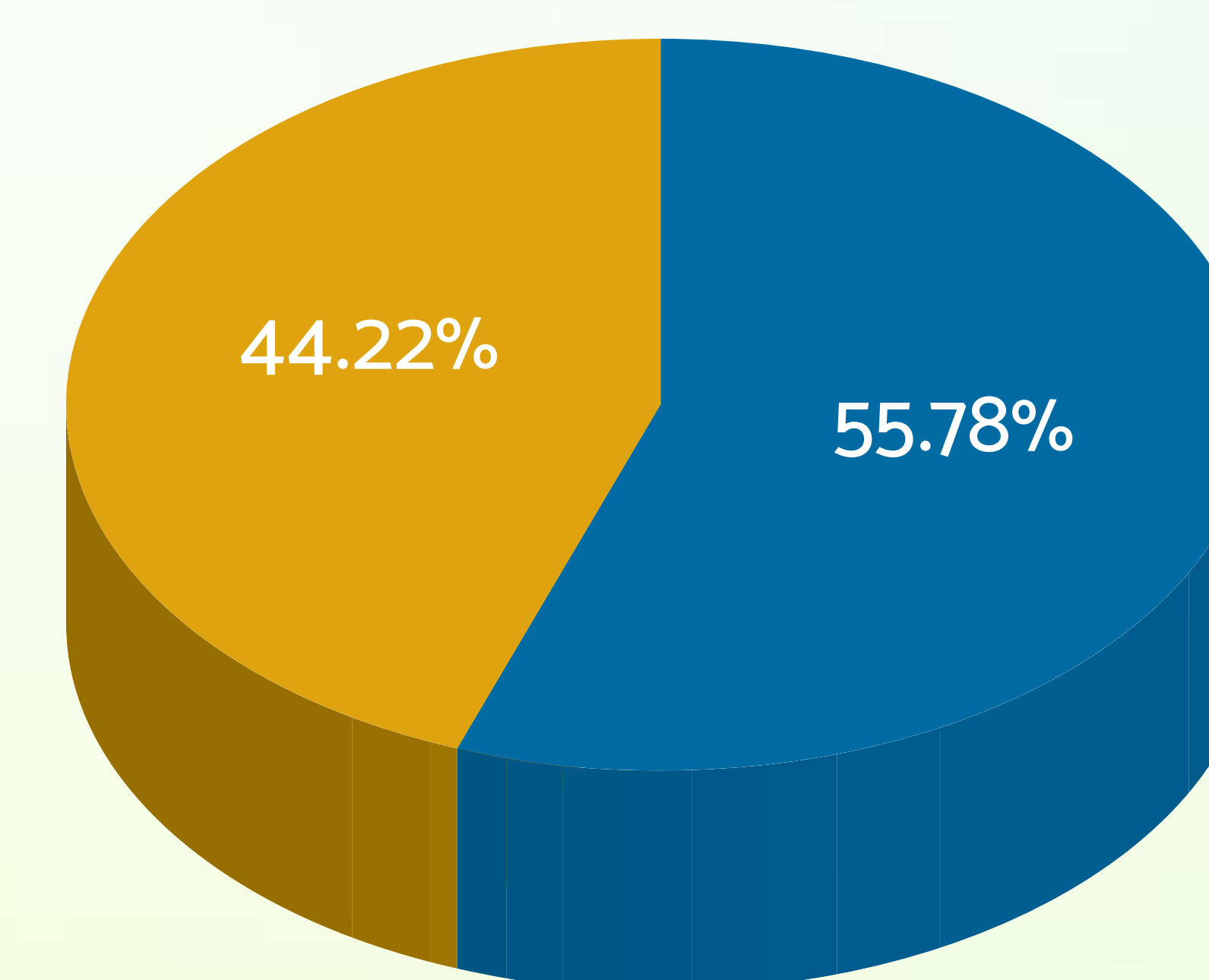
This study demonstrated 100% technical success rate and mostly minor adverse events after AXIOS LAMS use in drainage of PFC. Importantly only two patients required further surgical intervention to obtain desired outcome. Furthermore, length of stay was particularly low with median hospital stay of 3 days. Ultimately, this study highlights how AXIOS LAMS provides high value care by providing an efficient intervention in a cost-feasible length of time.

## Group Characteristics

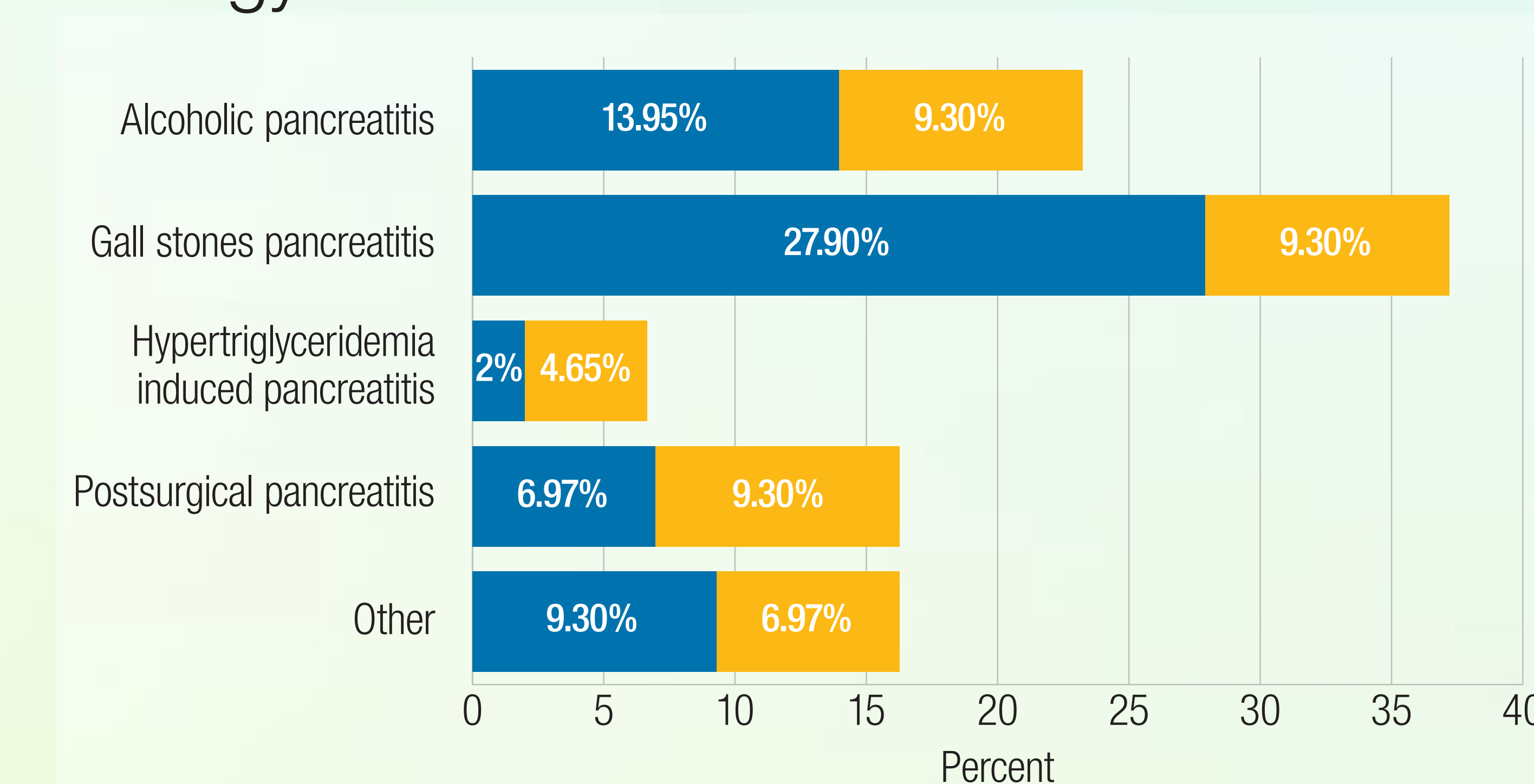
MALE 31 (72.1%)	FEMALE 12 (27.9%)	CAUCASIAN 34 (79.1%)	AFRICAN AMERICAN 2 (4.7%)	HISPANIC/LATINO 4 (9.3%)	OTHER 3 (7.0%)	AGE RANGE 22-75	MEAN AGE 54.88	MEDIAN AGE 56
-----------------------	-------------------------	----------------------------	------------------------------	-----------------------------	----------------------	--------------------	-------------------	------------------

■ WOPN ■ PP

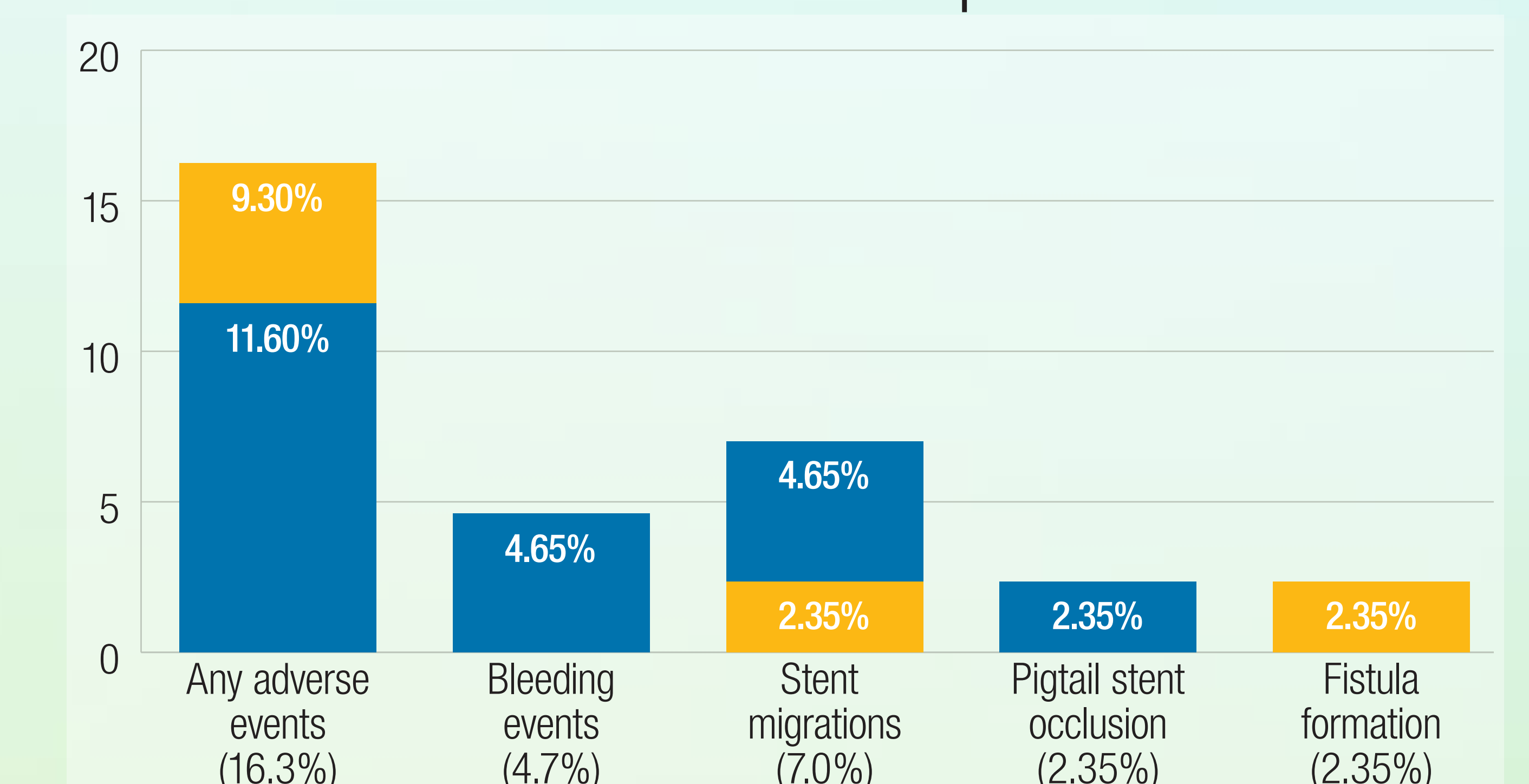
PFC



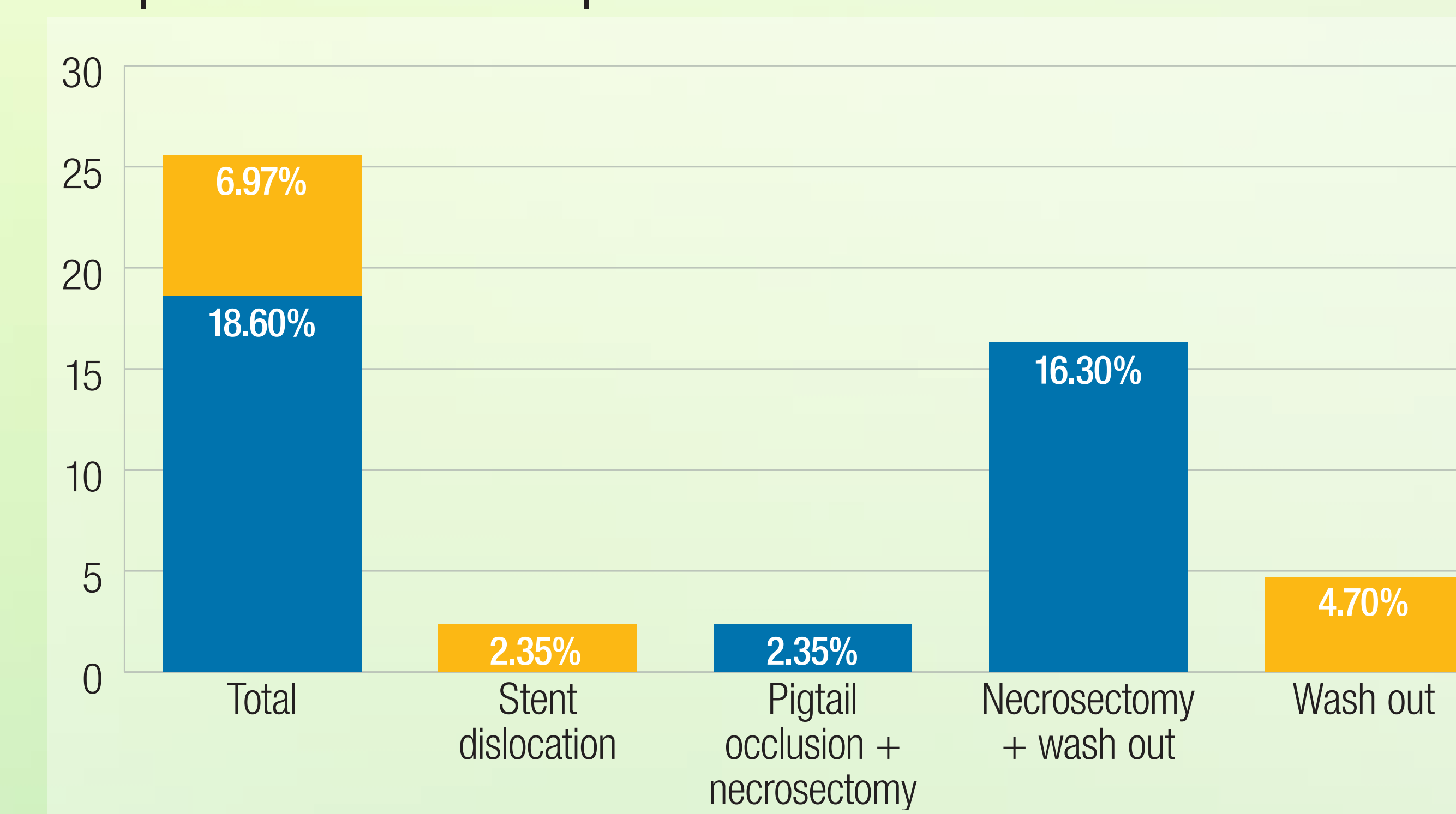
Etiology of PFC



Adverse events after LAMS placement



Repeat endoscopic interventions



Time to stent removal (days)

