Nursing Care during ERCP

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Abstract

Introduction: Endoscopic retrograde cholangio pancreatography (ERCP) is an endoscopic procedure that allows a detailed examination and diagnose of diseases of the bile ducts and the pancreatic ducts. Abroad, this procedure is considered a routine one, whereas in our country, falling short of specialized personnel, facilities and environments it is used little or not at all. The ERCP nurse should be specialized and should perform all the duties that a nurse performs in a operation room.

Objective: Since in the “Xhaferr Kongoli” hospital in Elbasan was inaugurated the endoscopic department which includes ERCP the objective of this theme is emphasizing the role of ERCP and the performance of the nurse during it.

Methodology: 14 clinical cases which were diagnosed and treated with ERCP were taken into study. 6 were pancreatic illness cases and 8 were bile ducts illness cases. For the patients with pancreatic illnesses ERCP was used in 100% of the cases for diagnosis and in 83, 33% of the cases for treatment. In bile ducts illnesses ERCP was used in 87,5% of cases for diagnosis and in 75% of cases for treatment. Complications were observed in 33, 33% of cases in the first group and in 37,5% of cases in the second group. The complications which were manifested during the procedure included the decrease of TA, respiratory depression, throat and abdominal pains which were quickly normalized with the intervention of the medical team.

Conclusions: ERCP is a mini-invasive procedure which creates the possibility of resolving problems which before required the execution of more invasive procedures that couldn’t resolve permanently the problem of the patient. It can also be used as a palliative procedure in case of non-operable tumors improving much the life of the patient. The role of the nurse during ERCP involves not only the care during and after the procedure, but also involves informing the patient about the preparations he should make and the complications that can occur during it. The nurse of ERCP serves as an intermediate between the doctor and the patient and is the advocate of the latest.

Keywords: ERCP, radiology room, pancreatic diseases, etc.

Introduction

ERCP (Endoscopic Retrograde Cholangio-Pancreatography) is a procedure that is used in the diagnosing and treatment of bile ducts and pancreatic diseases. All around the world it is a routine procedure whereas in our country, as a consequence of the lack of qualified personnel and appropriate facilities is rarely used. The doctors that need to follow this procedure must be specialized in this field. The nurse of ERCP should also be specialized and has to fulfill all the duties of a nurse in the operating room, since ECPR is a surgical intervention that is done in a radiology room.
ERCP is used for the diagnosing and treatment of the bile ducts calculous, neoplasive pancreatic-biliar, the blockage of sinker Oddi of biliarductus stenosis, pseudocists and pancreatic diseases. Before performing the ERCP the patient should be on an empty stomach and shouldn’t be under such medications as: AIJS, Antihypertensive, Antidepressants etc. ERCP procedure:

The risks related to this procedure include: pancreatitis, perforation, bleeding, rejection from the contrast matter, reduction of TA, respirator depression, nausea, vomiting, sore throat, abdominal pain, temperature, infections.

The necessary instruments for performing ERCP are: diagnostic catheters, sphincterotome, extractor balloon, Dormia catheter, mechanic lithotripters, mechanic dilators, pneumatic dilators, naso-biliar cannula or naso-pancreatic cannula.

14 clinical cases were taken under study (from the several years’ long experience of Prof.Dr. SkenderTopi), who were diagnosed or treated with ERCP. 6 cases were with pancreatic diseases and 8 cases with bile ducts diseases. The data were studies related to gender, age, type of disease, using ERCP as a diagnosing or treating procedure and the possible complications.

Out of the 14 cases taken under study 6 were males (42.85%) and 8 females (57.15%)
The patients with pancreatic diseases and bile duct diseases were particularly analyzed in respect of the group-age and type of disease, and the data were presented with the below charts.

Pancreatic diseases.

![Pancreatic diseases diagram]

Bile duct diseases

![Bile duct diseases diagram]

The data were analyzed in relation to the efficiency of ERCP as an endoscopic procedure and noticed that: In pancreatic diseases ERCP was used in 100% of the cases as a diagnosing procedure, in 83.3% of the cases as a treating procedure and in only 33.3% of the cases it had resulted in complications.
In bile duct diseases ERCP had been used in 87.5% of the cases as a diagnosing procedure, in 75% of the cases as a treating procedure and in only 37.5% of the cases it had resulted in complication.

From all the cases taken into study, the complications amounted up to 43% and included: reduction of TA (2 cases, 14.3%), respiratory depression (1 case, 7.4%), bleeding (1 case, 7.4%) abdominal pain, nausea, vomiting (1 case, 7.4%), throat pain (1 case, 7.4%)

**Conclusions**

ERCP is a mini-invasive procedure that enables us to resolve problems that before required very invasive interventions, which didn’t resolve completely the problem of the patient. It can be used as a palliative procedure in the cases of inoperable tumors in order to improve the patients’ life. The role of the nurse during ERCP involves not only the care during the procedure, but also the informing of the patient, the preparation he/she should do and the complications that may surge afterwards. The nurse during ERCP serves as a mediation figure between the doctor and the patient and is the formers’ lawyer.
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