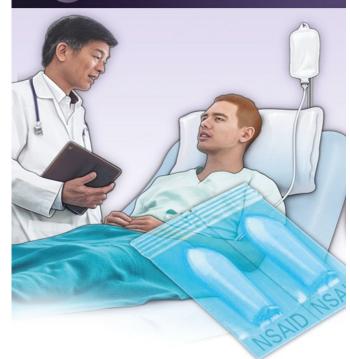


ASGE Guideline on Post-ERCP Pancreatitis Prevention Strategies: Summary and Recommendations By Cynthia Tran, MD

1. Periprocedural rectal NSAIDs to prevent post-ERCP pancreatitis (PEP).

- Use Indomethacin 100 mg in adults.
- Give > 30 min before/during procedure.
- Avoid in peptic ulcer or renal disease.

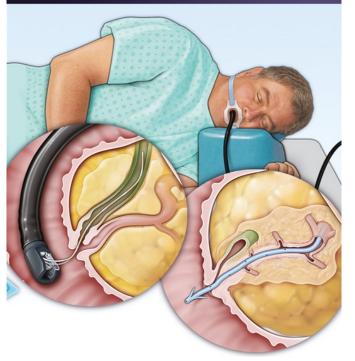
Pre procedure



2a. Use wire-guided cannulation, rather than contrast-guided cannulation, to minimize the risk of PEP.

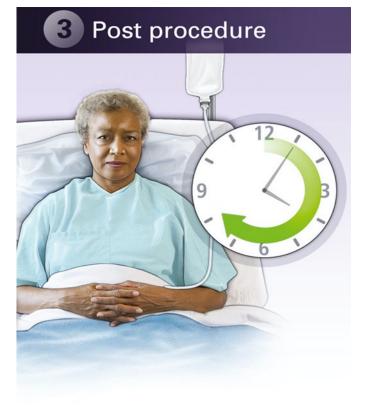
2b. Pancreatic stents to prevent PEP during high risk cases: difficult cannulation, PEP hx, precut sphincterotomy, or ampullectomy.

2 Intra-procedure



3. Aggressive periprocedural and postprocedural IV hydration to prevent PEP.

- Use lactated ringer's solution.
- Bolus 20 mL/kg then 3mL/kg/h x8 hrs.
- Avoid in CHF, CKD, or advanced liver disease.



ASGE STANDARDS OF PRACTICE COMMITTEE; Buxbaum JL, Freeman M, Amateau SK, Chalhoub JM, Chowdhury A, Coelho-Prabhu N, Das R, Desai M, Elhanafi SE, Forbes N, Fujii-Lau LL, Kohli DR, Kwon RS, Machicado JD, Marya NB, Pawa S, Ruan WH, Sadik J, Sheth SG, Thiruvengadam NR, Thosani NC, Zhou S, Qumseya BJ; (ASGE Standards of Practice Committee Chair). American Society for Gastrointestinal Endoscopy guideline on post-ERCP pancreatitis prevention strategies: methodology and review of evidence. Gastrointest Endosc. 2023 Feb;97(2):163-183.e40. doi: 10.1016/j.gie.2022.09.011. Epub 2022 Dec 12. PMID: 36517309.