

### **Choledochal Lithiasis. Multidisciplinary Therapeutic Target. Past and Present**

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#### **Abstract**

*Introduction:* Cholelithiasis still remains one of the most frequent pathologies encountered in surgical practice. The authors review the stages which marked the evolution of the treatment of choledochal lithiasis (CL) during the last 50 years, based on their own experience. From the exclusively surgical choledochus, we have reached a multidisciplinary therapy in which both endoscopy and interventional radiology have found their place.

*Material and Method:* The authors studied 2 groups of patients: Group 1 included patients from the period 1959-1997 (38 years - 982 cases of choledocholithiasis) who underwent classical surgery. Group 2 included patients treated between 1997-2017 (20 years – 347 cases) in whom both endoscopic surgery and classic surgery were used to obtain choledochal clearance. The types of choledochal lithiasis (CL) according to which the method of obstruction clearance was decided upon and chosen are presented here.

*Results:* All the patients in group 1 underwent classical surgery, representing 9.8% of operations for biliary lithiasis. In group 2, classical surgery was recorded in 23.4% of patients, and endoscopic surgery in 76.6% of them. We mention that there was no laparoscopic approach for the treatment of CL due to the absence of experience. In group 2 we recorded 26.3% endoscopic failure, while in the classical approach group there was 12.3% failure of obstruction clearance, the solution being biliodigestive anastomoses.

*Conclusions:* The authors propose three categories of therapeutic indications in CL. A first category is represented by the "endoscopic choledochus", which includes migrated lithiasis. A second category is the "surgical choledocus". It is the situation of complex and complicated lithiasis. Finally, there would be a third category - the "lithogenic choledocus". This last group includes the most aggressive lithiasis with repeated relapses, panlithiasis, etc. For categories 2 and 3, endoscopic - laparoscopic clearance attempts have no chance of success or are even contraindicated.

**Key words:** main biliary duct lithiasis (MBD), classical surgery of the main biliary duct, endoscopy of the main biliary duct