

# Endoscopic Retrograde Cholangio-Pancreatography (ERCP)

X-Ray Department  
Tel: 01271 311869

## Other formats

If you need this information in another format such as audio CD, Braille, large print, high contrast, British Sign Language or translated into another language, please contact the PALS desk on 01271 314090 or at [rduh.pals-northern@nhs.net](mailto:rduh.pals-northern@nhs.net).

This leaflet will answer many of your questions about your ERCP. However, if you would like to speak to someone, please contact the Radiology Department on 01271 311869.

## Why am I having the procedure?

ERCP allows us to establish the reason for jaundice (yellow skin), abnormal liver function (from blood tests), gallstones, biliary and pancreatic inflammation. This will help us make a clear diagnosis. You will probably already have had an MRI scan that has indicated the need for having an ERCP

## What is ERCP?

This procedure enables the doctor to examine the common bile duct, pancreas and gall bladder. The doctor passes a flexible tube called an endoscope (or "scope") through your mouth, stomach and into your small bowel (duodenum). Contrast is then put into the bile drainage hole (Papilla) to take detailed x-rays.

### 1. Sphincterotomy

If your MRI scan shows a gallstone in the bile duct, the specialist can enlarge the opening of the bile duct. This is called 'sphincterotomy', and is done with an electrically heated wire, which you will not feel. Any stones will be removed.

### 2. Stenting

If your MRI scan shows that the bile duct has become too narrow, the specialist will use the endoscope to position a stent in the duct to widen it. A stent is a small metal tube. You will not be aware of the presence of the stent and it will probably stay in your body permanently. The stent relieves the jaundice by allowing the bile to drain freely into the intestine.

## Where is the ERCP done?

Your ERCP will be done in the Radiology Department on level 2 at the North Devon District Hospital.

## How to find us

If you come through the main hospital entrance, take the second corridor on your right (just before the cafe). Continue half way down the corridor and then take a left turn to the X-ray A reception desk.

## What preparation will I need?

A Radiology Nurse will phone you approximately a week before your appointment to complete a pre-procedure assessment and answer any questions you may have about your ERCP.

To allow a clear view, the stomach and gut must be empty. Therefore, you should:

- Have **nothing to eat** for six hours before your appointment time.
- Have **nothing to drink** for four hours before your appointment time. Although you can sip on water for 2 hours before the procedure.

Please continue with your usual medication. However, if you are on diabetic medication (insulin or tablets) and need advice, please contact the diabetic liaison nurse on 01271 322726.

If you are on any blood thinning medication eg, warfarin, rivaroxaban, or clopidogrel you will need to contact your consultant's secretary 10 days before your appointment for special instructions. You CAN continue taking aspirin.

You will also need to arrange to have some blood tests at your GP surgery two working days before your appointment.

When you arrive in the department, a nurse will discuss your ERCP with you. If you have any allergies or bad reactions to medication or other tests or have had previous Endoscopic procedures, please inform the nurse on admission.

## What should I bring on the day?

Please bring:

- Insulin/tablets if you are diabetic.
- Your reading glasses.

## Before the test

The specialist will see you on the day of the examination. You will be able to ask any questions or discuss any concerns that you may have.

**You will also be asked to sign an electronic consent form** to allow the procedure to be carried out.

**The consent form is an important legal document, therefore please read it carefully.**

Once you have read and understood all the information, including the possibility of complications and you agree to undergo the investigation, please sign and date the consent form.

## What will happen during the test?

We will give you a throat spray to numb the throat and you will be asked to lie on your front with your arms by your sides, we will make you as comfortable as possible. A nurse will stay with you throughout the procedure. A probe and blood pressure cuff will be put on to monitor you during the procedure. To protect your teeth (and our scope) a small plastic mouthguard will be placed between your teeth with a strap that goes around your head. Oxygen will be given via the mouthguard during the procedure. The sedation will be given by the Endoscopist. This is not a general anaesthetic. The procedure will then start.

## After the test

You will be recovered in the Radiology Department for 4 hours. Your throat may feel slightly sore and you will feel sleepy.

After resting, you will be given a drink of water. You may feel a little bloated due to air blown in through the tube. This will quickly pass. You are normally sat up eating, drinking and feeling better 3 hours post procedure with discharge home an hour after this.

Your GP will be informed of your results and you will be given your procedure summary notes to take home.

## What are the risks?

An ERCP is a skilled procedure and is performed by a highly trained doctor who takes every care to reduce any risks. The main risk is inflammation of the pancreas (pancreatitis). The risk of this occurring is about 2%.

If special treatment is required during the procedure, to help remove a gallstone for example, an incision will be made in the lower end of the bile duct. There is a slight chance of bleeding or perforation from this incision (also about 2% of patients).

These problems usually settle down on their own, though they may delay your return home by a few days. Very rarely, an operation is necessary to treat a complication.

An ERCP requires the use of a sedative drug, which can, in a very small number of patients, cause the breathing or heart rate to slow down. For this reason, the nurse will put a probe on your finger to monitor your pulse and oxygen levels.

You will also have your blood pressure monitored. The effects of the sedative are easy to reverse if necessary. If you are asthmatic, or have any breathing difficulties, please inform the nurse on your arrival and bring your inhaler with you if you use one.

## Further information

If you need more information or have any problems after ERCP which you feel may be related to the test, please contact your GP or the X-ray department on **01271 311869** (9am to 5pm Monday to Friday).

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## PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answers questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email [rduh.pals-northern@nhs.net](mailto:rduh.pals-northern@nhs.net). You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

## Have your say

Royal Devon University Healthcare NHS Foundation Trust aims to provide high quality services. However, please tell us when something could be improved. If you have a comment or compliment about a service or treatment, please raise your comments with a member of staff or the PALS team in the first instance.

Tell us about your experience of our services. Share your feedback on the Care Opinion website [www.careopinion.org.uk](http://www.careopinion.org.uk).

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