

# FLUOROSCOPIC-GUIDED PLACEMENT OF NASOENTERIC TUBE AFTER WHIPPLE PROCEDURE

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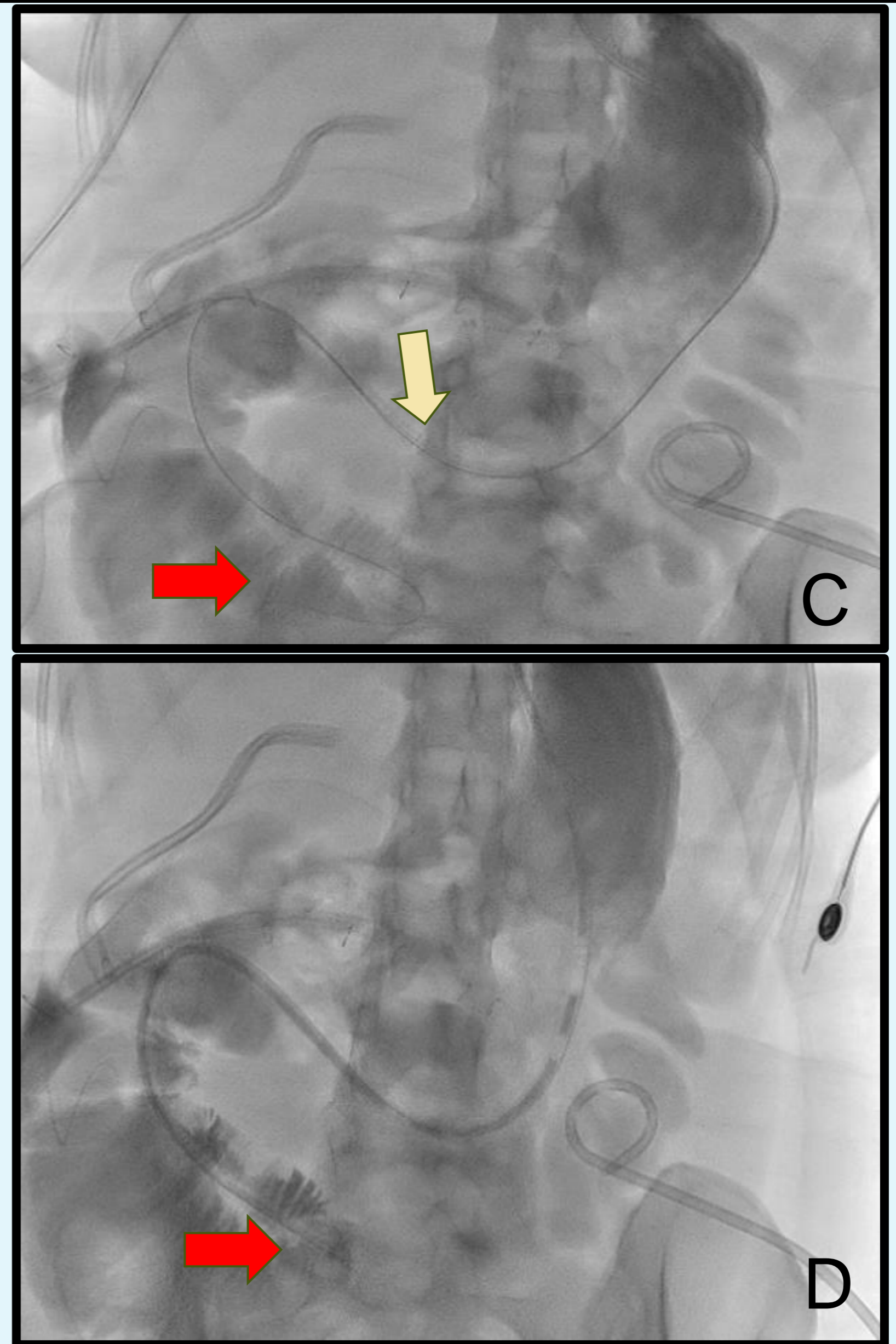
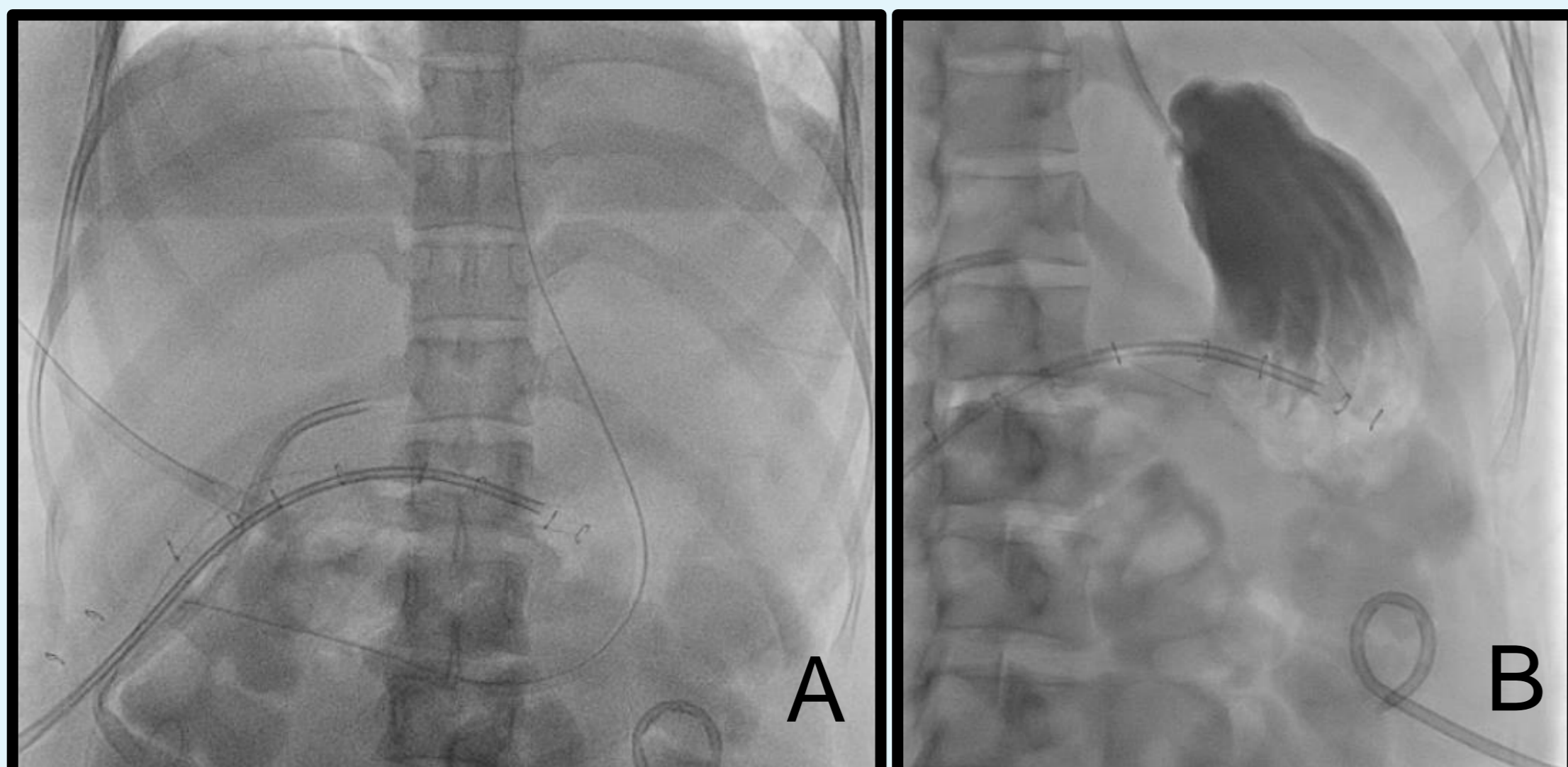
## INTRODUCTION:

Whipple Procedure (also known as pancreatoduodenectomy) involves several procedures in one operation: antrectomy, proximal pancreatectomy, duodenectomy, excision of distal common bile duct, hepaticojejunostomy, pancreaticojejunostomy, gastrojejunostomy, and jejunojejunostomy. One of its known complications is anastomotic leak (3-26%). In such case the physiologic nutritional support is compromised. One method to ensure continuous delivery of enteral nutrition is through placement of a nasoenteric tube via fluoroscopic guidance.

## CASE DESCRIPTION:

A 46/Female diagnosed with pancreatic adenocarcinoma underwent Whipple Procedure. Patient was referred for nasojejunal tube placement for feeding and decompression.

## PROCEDURE AND FIGURES:



A. Initial plain abdominal fluoroscopy (post-surgical). B. Introduction of contrast-material into the stomach. C. Cannulation of the small intestine using guidewire (red arrow) and angiographic catheter (yellow arrow) D. Final placement of nasojejunal feeding tube via exchange of the angiographic catheter (red arrow)

## DISCUSSION:

The majority of procedures were performed on the ward level. In difficult cases, insertion under fluoroscopic guidance is undertaken. There is an approximately 2% risk of tracheopulmonary complication from insertion of a nasoenteric tube, including inadvertent insertion into the tracheobronchial tree.

## CONCLUSION:

Fluoroscopic guidance with over-the-wire technique aims for the proper placement of the feeding tube especially in patients with surgically altered anatomy.