

# Endoscopy International Open

## Endoscopic Ultrasound with Tissue Acquisition of Lymph Nodes in Patients with Potentially Resectable Intrahepatic Cholangiocarcinoma

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### Abstract:

#### Background:

Lymph node (LN) involvement is a poor prognostic factor for patients with intrahepatic cholangiocarcinoma (iCCA). The aim of this study was to evaluate the yield and impact on clinical decision making of EUS with tissue acquisition (TA) of LN in patients with potentially resectable iCCA.

#### Materials and methods:

In this multicentre cohort study, patients with potentially resectable iCCA and preoperative EUS between 2010–2020 were retrospectively included. Impact of EUS-TA was defined as the percentage of patients who did not undergo surgical exploration due to pathologically confirmed positive LN found with EUS-TA.

#### Results:

A total of 56 patients underwent an EUS, with 91% of patients to target suspicious LN on imaging. EUS-TA of LN confirmed malignancy in 21 LN among 19 patients (34%). In 17 patients (30%), surgical exploration was withheld due to the nodal involvement. Finally, 24 patients (43%) underwent surgical exploration where positive regional LN were identified in 6 patients (25%).

#### Conclusions:

In patients with potentially resectable iCCA and suspicious LN on cross-sectional imaging, EUS-TA confirmed LN involvement in 30% of patients. Surgical exploration was withheld mostly because of extraregional LN involvement and regional LN involvement in patients with a high surgical risk.

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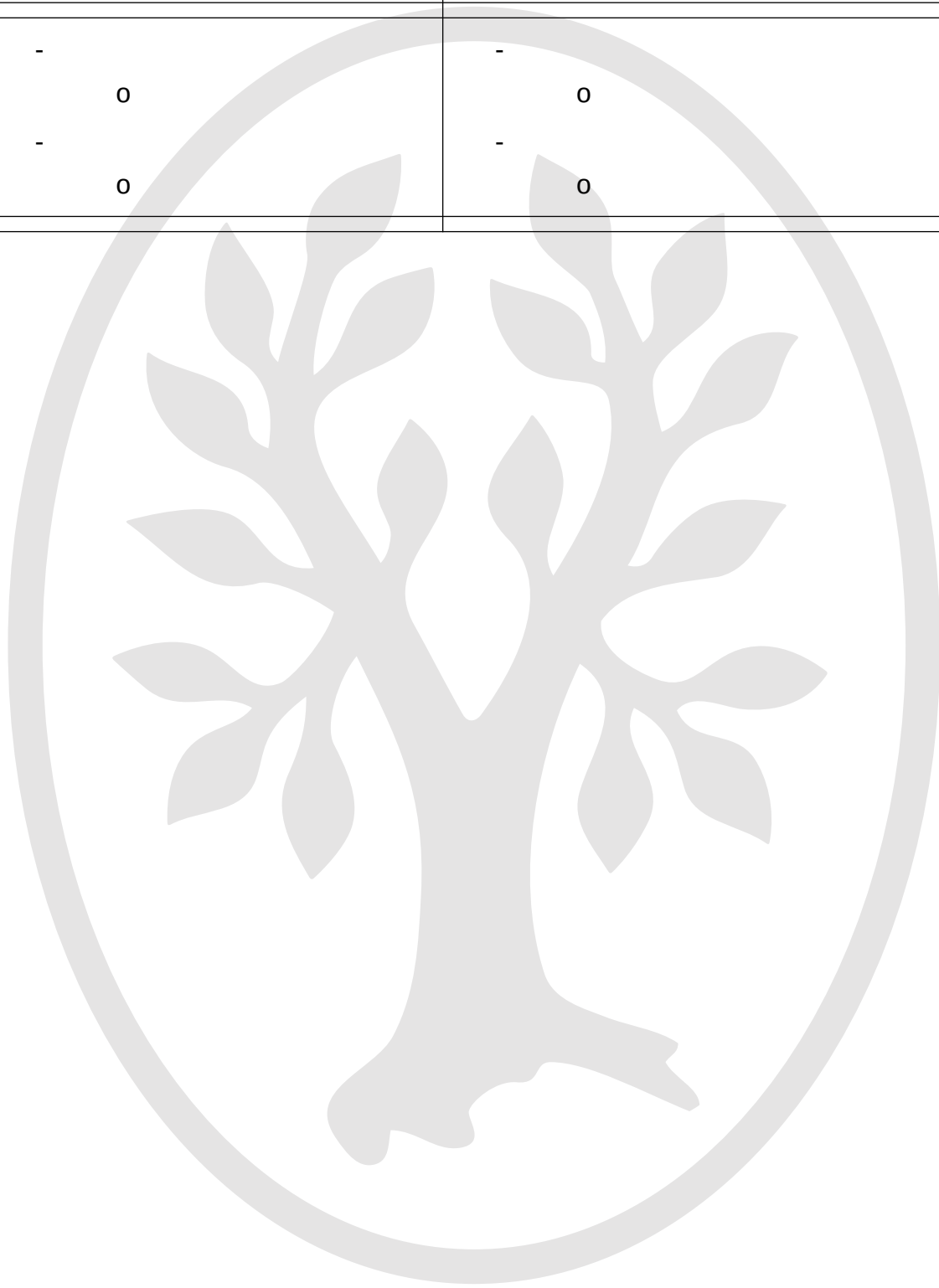









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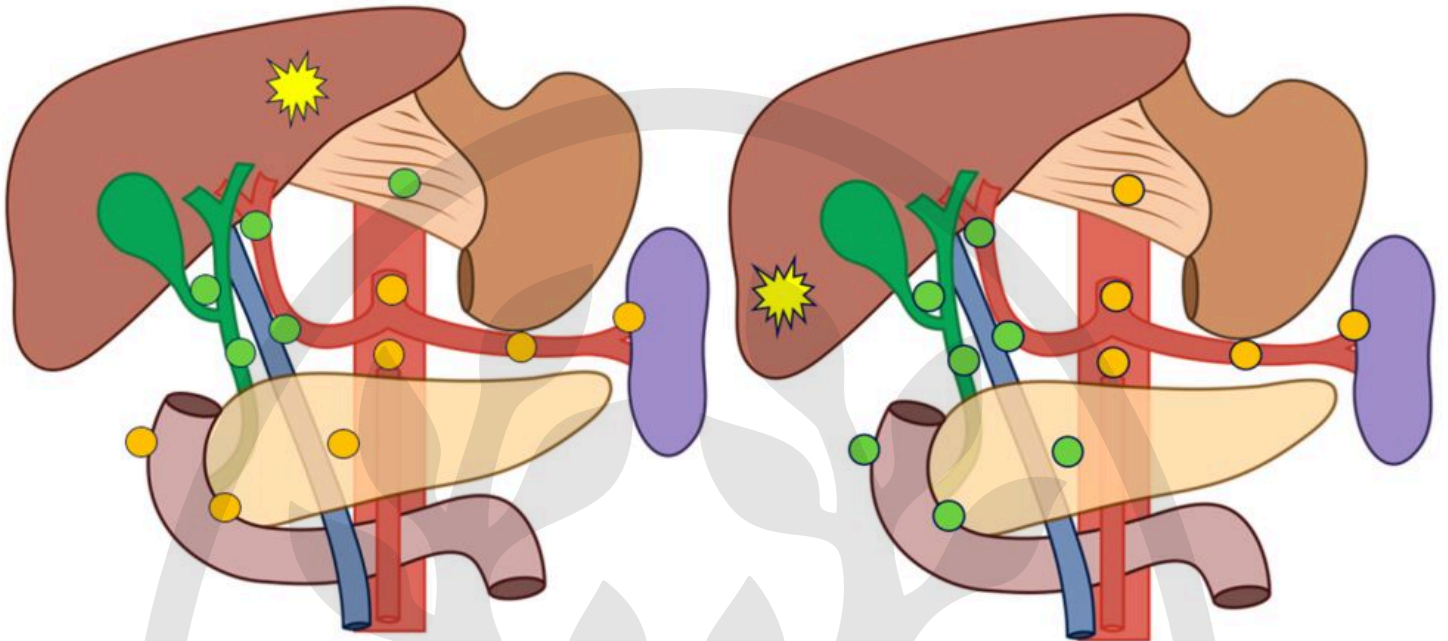
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## Left-sided iCCA

## Right-sided iCCA



-  = Regional LN
-  = Extraregional LN



