

# Letter to the Editor

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Dear doctors:

I read the article published in the most recent issue of the review by Del Castillo and Arango entitled “Determination of the frequency of hyperamylasemia and pancreatitis in patients undergoing endoscopic retrograde cholangiopancreatography” with great interest. This article says that this issue had not been evaluated in Colombia, so I would like to remind you that our group published a similar article more than five years ago. (1) It is regrettable that no reference is made to this work, which is not important for us, but for the journal since this is one of the indicators that allows for better classification in Publindex.

On the other hand, although the study had a small sample, I think it is striking that it has such a low percentage of pancreatitis compared to what we reported in our study: 2% vs. 5.9%, respectively. Two percent is also well below other reports in the literature. (2-8) The difference in percentages of hyperamylasemia of 30% versus 65% is similar. This number is admirable, even more so if one takes into account that since the study was done at an academic center, it is assumed that residents are the first to attempt cannulation.

Another issue that draws a reader’s attention is the fact that the authors do not mention if they use pancreatic stents, hydration, diclofenac or other methods to prevent pancreatitis. This could be understandable if cannulation is only done by professors or because if residents have a lot of experience in cannulation. It would be interesting if the authors would clarify the reason for such good results especially in light of the largest study published to date. It includes 108 studies with 13,296 patients, the average incidence of pancreatitis was 9.7 % (varying from 4% to 15%) with a mortality rate of 0.7%. (9)

Finally, I find it very interesting when the review publishes these research studies about endoscopic retrograde cholangiopancreatography (ERCP) which show local experiences.

Cordially,

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