day mortality rate of 3.2%. The most common cause of death was pneumonia including COVID-19 pneumonia.

O-L03  Safety and Efficacy of Endoscopic Retrograde Cholangiopancreatography for Removal of Common Bile Duct Stones in the Nonagenarians: A Single Tertiary Centre Experience

Sijjad Ijaz, Amaan Khan, Mohammed Gariballa, Mustafa Jalal, Yasser Amer Al-Joudeh
Sheffield Teaching Hospitals, Sheffield, United Kingdom

Background: It is estimated that one in four persons in the UK will be >65 years old by 2050. Endoscopic retrograde cholangiopancreatography (ERCP) is the recommended therapy for removals of common bile duct (CBD) stones. There is a lack of UK data on the outcome of ERCP in the very elderly. We aimed to investigate the safety and efficacy of ERCP in the management of CBD stones in the elderly >90 years old compared with those aged 65-89 years old.

Methods: We retrospectively analysed patients undergone ERCP between 2016-2020. Those with conditions other than suspected CBD stones were excluded. The following data was collected: general demographics, comorbidities, American Association of Anaesthesiology (ASA) grading, presence of dementia, anticoagulation therapy, endoscopic report on completed intention of treatment which is defined by either removal of stone and/or stent insertion. Also, post-procedure complications were collected including post-ERCP pancreatitis (PEP), bleeding, perforation, cholangitis, respiratory, and cardiovascular (CVS) events. Readmission within 7 days and death within 30 days were collected. Outcomes were reported as mean ± (SD) or n (%). Statistical significance was considered when P < 0.05.

Results: Total, 126 patients ≥ 90 years (group A) compared to 262 patients aged 65-89 years (group B). Higher rate of dementia, and anticoagulation therapy in Group A (17.4%) vs (0.4%), p < 0.0001 and (36.5%) vs (17.9%), p < 0.0001, respectively. Completed treatment was achieved in group A (90.5%) compared to group B (89.9%), p 0.7. One patient (0.8%) had PEP group A compared to 8 (3.1%) group B, p 0.3. Overall complications (13.5%) group A vs (9.5%) group B, p 0.3. Four cases (3.2%) died within 30-day in group A compared to group B 5 (1.9%), p 0.5. There was no procedure-related death.

Conclusions: ERCP for removal of CBD stones in ≥ 90 years old is effective. Risk of post-ERCP pancreatitis and overall adverse events were not higher in the > 90 years compared to 65-89 years old. We report a 30-