

**BP OP 4-4****Incidence, Risk Factors, and Outcomes of Jejunal Varices of the Afferent Loop after Pancreatoduodenectomy**

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**Introduction :** Jejunal varices is a worrisome late complication after pancreaticoduodenectomy (PD) due to recurrent and intractable bleeding. This study was aimed to determine the incidence, risk factors, and outcomes of jejunal varices after PD.

**Methods :** A total of 709 patients who underwent PD from 2007 to 2017 were enrolled in the study. Preoperative and postoperative follow-up CT images were reviewed to evaluate the development of portal vein (PV) stenosis (>50%) and jejunal varices, which was defined as engorged dilated veins & >3mm.

**Results :** Jejunal varices developed in 83 (11.7%) patients after a median duration of 12 (5-21) months after PD. Among those patients, 18 (21.6%) experienced variceal bleeding. PV stenosis ( $P<0.001$ ; OR 33.234, 95% CI 15.568-66.666) and PV/SMV resection ( $P=0.028$ ; OR 2.261, 95% CI 1.090-4.687) were identified as independent predicting factors for jejunal varices. None of 9 patients who underwent stent placement for PV stenosis before the formation of jejunal varices experienced variceal bleeding, whereas 18 (27.3 %) of 135 patients who did not receive PV stent placement experienced at least one episode of variceal bleeding. Among 17 patients with PV stent placement, variceal bleeding occurred in 3 of 7 patients with stent thrombosis, but not in 10 patients without stent thrombosis.

**Conclusions :** The results revealed that the incidence of jejunal varices was not low after PD and PV stenosis was a strong risk factor for jejunal varices. Early placement of PV stent and maintenance of stent patency could reduce the risk of variceal bleeding in patients with PV stenosis.

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