# **Bile Duct Cancer: Stent or Catheter Placement**



Bile duct cancer might lead to a tumor that blocks the bile duct. This can cause bile to build up and cause problems like liver failure, itching, nausea, pain, and yellow eyes and skin (jaundice).

A blockage like this can be treated in these ways:

- A stent can be put in the bile duct. A stent is a short, thin plastic or metal tube, like a tiny straw. It helps
  keep the duct open to drain bile and keep it from building up.
- A thin, flexible tube called a catheter can be used. One end of the catheter is put into the duct. The
  other end comes out through your skin. This allows bile to drain into a small bag that can be emptied.

A bile stent or catheter may be put in to relieve jaundice before surgery. It may also be used for advanced cancer to help keep the bile duct open or drain out bile if surgery can't be done.

A stent or catheter can be put in during surgery or with 1 of these procedures:

## Stent placement using ERCP

Endoscopic retrograde cholangiopancreatography (ERCP) is the procedure used to place the stent. ERCP is also used to find bile duct cancer.

During this procedure, you are given medicine (sedation) to put you into a light sleep so you won't feel pain. Your throat is numbed. A thin, flexible tube called an endoscope is slid down your throat, through your stomach, and into your small intestine. A dye is put in through the scope and into the bile ducts. The dye can be seen on X-rays. It's used to find the blockage. The scope is then moved into the blocked bile duct. The stent is then slid through the scope and into your bile duct to open the blockage.

## Stent or catheter placement using PTC

A percutaneous transhepatic cholangiogram (PTC) is used to put in the stent. During this procedure, the right side of your belly (abdomen) is numbed. Then the healthcare provider puts a long, thin needle through your skin and into your liver. Ultrasound or X-rays are used to guide the needle to the right place.

Dye is then sent through the needle into your bile ducts. The dye can be seen on X-rays, which will show any blocked ducts. A small wire is passed through the needle and into the blockage. The stent is slid over the wire and into the blockage to keep your bile duct open. A catheter that drains bile out of your body can also be put in this way.

### Questions to ask your healthcare provider

Here are some questions you may want to ask your healthcare provider about these procedures:

- If I need a stent or catheter, how will it be put in?
- What will happen if I don't have the stent or catheter put in?
- Will a plastic or metal stent be used?
- How long should the stent last?
- Is the stent or catheter permanent or temporary?
- Who will put in the stent or catheter?

- What kind of treatment do I need after the stent or catheter is placed?
- How will I feel after the stent or catheter placement?
- How do I empty the catheter bag?
- When can I get back to my normal activities?
- · Will the procedure affect my diet?
- · What kind of problems should I watch for?
- What kind of follow-up care will I need after stent or catheter placement?

### What to expect after stent placement

The stent or catheter may be removed later if you have surgery to try to remove the cancer. Or it may be left in place if you aren't able to have surgery.

Stents may need to be replaced after a few months, or they may become blocked. This can lead to infections or other problems. Your healthcare provider will tell you about any other things you may need to watch out for.

You may need to take antibiotics to help prevent infection as you recover from stent placement. Imaging tests may be done to make sure the stent stays in the bile duct and is working.

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