

Case Report

Common Bile Duct Stricture & Prior Cholecystectomy

Helsinki University Hospital Helsinki, Finland



48 y/o female patient was presented with strictures in the common bile duct (CBD) due to prior cholecystectomy.

Patient had both plastic and self-expanding metallic sents (SEMS) placed previously and then subsequently removed. The stricture had been slightly dilated by the previous interventions, but not completely (image 1).

Doctors in Helsinki wanted to place an **ARCHIMEDES** biodegradable stent for the last treatment to fully dilate the lumen and to mitigate having to bring the patient back for yet another ERCP for stent removal.



Image 1. Fluroscopic view of contrast medium in the CBD highlighting the area of the stricture.



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Image 2. Fluoroscopic view of the three (3) **ARCHIMEDES** stents placed in the CBD.

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Three (3) slow degrading **ARCHIMEDES** stents (10 F \times 10 cm) were endoscopically placed across the stricture site. Image 2 shows the three (3) ARCHIMEDES stents in place alongside each other in the CBD.

Due to the biodegrading properties of the **ARCHIMEDES** stent, the doctors in Helsinki felt more comfortable placing the stents further into the CBD to ensure proper placement, utilizing both proximal and distal anti-migratory struts, without concern of later removal due to migration or occlusion.

The physicians were all pleased with the easy and successful placement of the first **ARCHIMEDES** stents in Finland. They commented that the three (3) **ARCHIMEDES** stent placements went smoothly and efficiently, with lead physician Dr. Leena Kylänpää, specifically calling attention to the procedural similarities to placing traditional plastic stents.

Pictured below are the doctors of the Helsinki University Hopsital, including lead GI physician, Dr. Leena Kylänpää, the Director of Global Sales for amg GI, Shawn O'Brien, and Jorma Kinnunen of CardiRad Distributors.



Image 3. The entire team in Helsinki for the first placement of the **ARCHIMEDES** in Finland.



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