amginternational A Q3 Medical Company

Case Report

Biliodigestive Anastomotic Stenosis (Percutaneous)

Policlinico Univ. Hospital Umberto I Rome, Italy



ARCHIMEDES

Biodegradable Biliary and Pancreatic Stent

65 y/o male patient with prior jejunostomy presented with a benign stenosis resulting from a biliodigestive anastomosis.

As patient had previous percutaneous procedure, decision was made to place the stents percutaneously at the same access site.

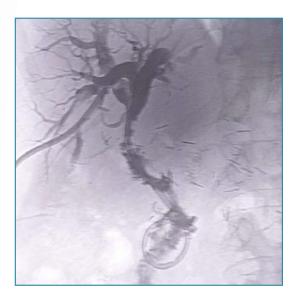


Image 1. Fluoroscopic view of the hepatobiliary track with stenosis, along with a drainage catheter.

Biopsy samples were retrieved during a prior intervention to rule out any malignancy and a 12 mm balloon was also used to dilate the anastomatic stenosis.

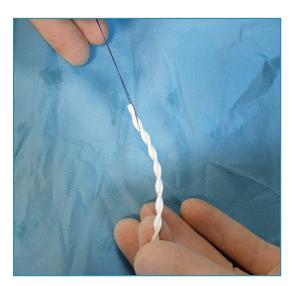


Image 2. Absorbable 3-0 "holding suture" utilized to prevent dislodgment of first stent by second stent.

The drainage catheter seen in image 1 was removed and a 11 F x 25 cm peel-away introducer set was selected, along with a hydrophilic 0.035" guidewire.

Due to the measured diameter of the biliary duct, the decision was made to place two (2) 10 F x 80 mm slow-degrading **ARCHIMEDES** stents side-by-side in order to facilitate drainage.

Due to the possibility of dislodging the first stent during the placement of the second stent, a 3-0 absorbable suture was selected to be placed around the distal flap of the first **ARCHIMEDES** stent (image 2). The "holding suture" would be used in order to retain active control of the first stent, at the time of implantation of the second stent.

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The **ARCHIMEDES** stent was introduced into the sheath, with the holding suture in place (image 3) and was implanted successfully, easily negotiating the severe curvature of the duct, with the good support from the introducer sheath (image 4).

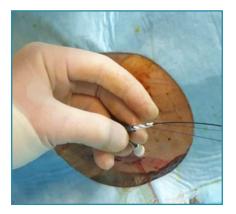


Image 3. Insertion of first the **ARCHIMEDES** stent into the sheath.

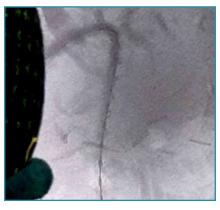


Image 4. Fluoroscopic view of first **ARCHIMEDES** stent in position.

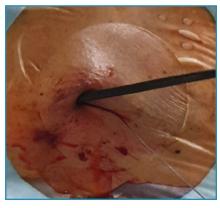


Image 5. Insertion site showing the introducer sheath along with the "holding suture".

Introducer sheath was peeled-away and the guidewire was repositioned for the implantation of the second **ARCHIMEDES** stent (image 6 and image 8).



Image 6. Fluoroscopic view of the positioning of the second wire for the second stent.



Image 7. Site view; ready for implantation of second ARCHIMEDES stent.

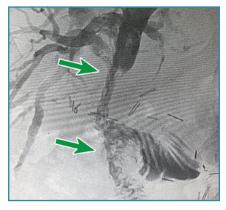


Image 8. Final fluorscopic view of both **ARCHIMEDES** stents in position.



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