

CASE REPORT

HYDROSLIDE 0.025" EXTRA STIFF

Written by apl. Prof. Dr. med. Sebastian Krug

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MEDICAL HISTORY

A 72-year-old patient with a known urothelial carcinoma (first diagnosed in 2016) presented with progressive lymph node metastasis, including infiltration of the pancreatic head and consecutive congestion of the CHD. Due to an increase in the cholestasis parameters, the patient consulted a gastroenterologist to discuss possible therapies.

FINDINGS

In this case, we first performed an OGD and endosonography. The duodenum was visibly swollen, with an inflamed and vulnerable mucosa (see Image 1). There was no clear infiltration of the metastasis into the duodenum. By means of endosonography, it was possible to distinguish a 6 x 5 cm mass in the head of the pancreas. In addition, the CHD was dilated up to 14 mm and infiltrated by the tumour in the distal region (Image 2). Initially, it was difficult to visualise the papilla correctly by means of ERCP due to the marked swelling in the area of the papillary ridge.

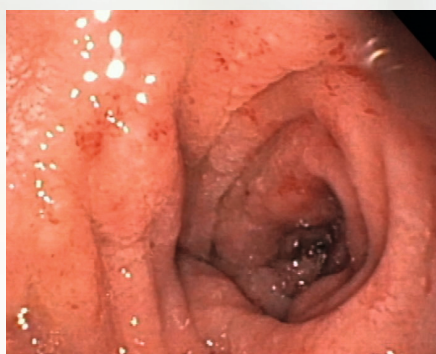


Image 1

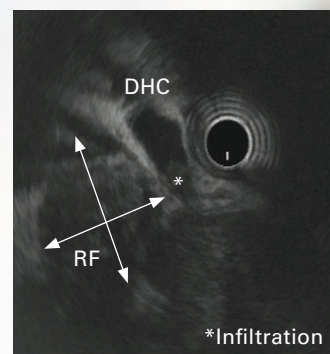


Image 2



Image 3

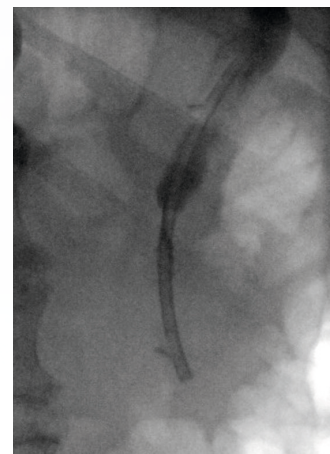


Image 4

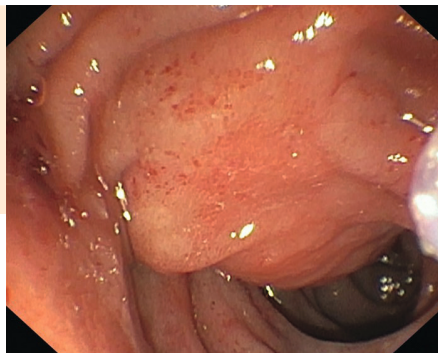


Image 5



Image 6

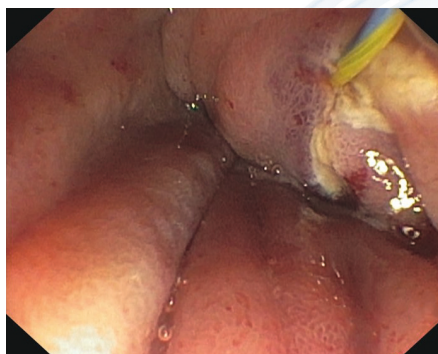


Image 7

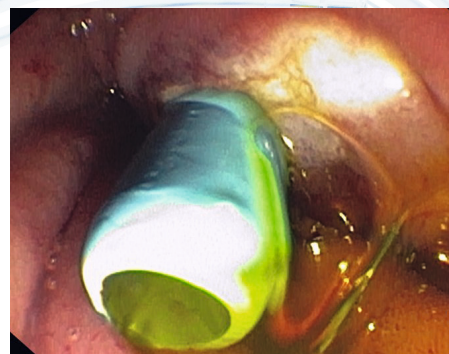


Image 8

The probe was performed using a MICRO-TECH Hydroslide guide wire with a 0.035" core and a total diameter of 0.025" (REF: MTN-BM-63/45-A-S), which is well suited for the cannulation of difficult papillae. After successful cannulation and visualisation of the distal CHD stenosis (Image 3), an endoscopic papillotomy was performed and a 7 cm 11.5 Fr straight plastic stent was inserted (Image 4) (REF: delivery system BPDI-1140/22, plastic stent BPDS-31114-1107).

Images 5–8 show the sequence of the examination from macroscopic visualisation of the papilla to wire probe, papillotomy and bile drainage after the placement of the stent. There were no complications after the intervention. As the cholestasis parameters fell sharply, the patient could be discharged and would qualify for further oncological therapies.

CONCLUSION

The MICRO-TECH Hydroslide extra stiff with an overall diameter of 0.025" makes it easy to cannulate even difficult papillae without any qualitative or technical losses in terms of stiffness and radiolucency.

PRODUCT INFORMATION

The Hydroslide 0.025" extra stiff is made of bending-resistant and torsion-proof Nitinol. In daily applications, it is highly precise, thanks above all to the loss-free transmission of the user's rotation and thrusting movement to the tip of the wire, aided by the high level of stiffness and controllability of the wire.

Thanks to the hydrophilic tip, the guide wire safely finds its way even in difficult-to-reach areas and stenoses. Since even anatomically difficult passages can be easily reached, the wire is not only suitable for complex stent placements, but also for use in combination with EUS examinations. Moreover, the high radiopacity of the flexible hydrophilic tip ensures optimal positioning from a radiological point of view.

MICRO-TECH Endoscopy
Hydroslide 0.025" extra stiff

Source: MICRO-TECH Europe GmbH

