Use of intraductal cholangioscopy devices to retrieve migrated pancreatic stents

The incidence of proximal pancreatic stent migration is unknown, though early studies report up to 5%, with recently reported success rates of <80% for stent retrieval using conventional techniques [1]. Stent retrieval remains challenging owing to characteristically small pancreatic duct diameters, strictures, tortuous distal pancreatic duct course, stent location proximal to the genu, and small-caliber stents.

Novel retrieval techniques for proximally migrated pancreatic stents have included pancreatoscopy to achieve guidewire cannulation of the stent lumen [2,3] or facilitate retrieval using SpyByte forceps (Boston Scientific, Marlborough, Massachusetts, USA), though duct diameter must be large enough to accommodate a SpyScope for such techniques. For ducts of small or normal diameter, proximally migrated stents can be cannulated with a guidewire, over which mini-snakes can be passed to retrieve the stent [4, 5]. We describe two cases in which a SpySnare and SpyBasket, used without the accompanying SpyScope, were used to retrieve proximally migrated pancreatic stents in normal diameter ducts (▶ Video 1).

A 52-year-old woman was referred for retrieval of a proximally migrated prophylactic 5-Fr pancreatic stent. On pancreatography the stent’s distal tip was proximal to the genu with the proximal tip in the body or tail. A pancreatic sphincterotomy was performed using a papillotome over a guidewire. The stent lumen was cannulated with a 0.035-inch guidewire. Despite previous unsuccessful retrieval attempts using SpySnare, the pancreatic stent was successfully captured and retrieved using SpyBasket.

A 44-year-old woman with history of relapsing pancreatitis presented for repeat endotherapy. The previously placed pancreatic stent was not visible endoscopically, and stent migration proximal to the genu was confirmed on fluoroscopy. A 4-mm balloon was used to dilate a distal pancreatic duct stricture. The stent lumen was cannulated with a curved 0.035-inch guidewire. Despite previous unsuccessful retrieval attempts using SpySnare, the pancreatic stent was successfully captured and retrieved using SpyBasket.

Endoscopy_UCTN_Code_CPL_1AK_2AI

Competing interests

None

The authors

Sheila Rastegari, Cassandra Craig, Elizabeth John, Prashant Kedia, Paul Tarnasky
Methodist Dallas Medical Center, Dallas, Texas, United States

References


Corresponding author

Cassandra Craig, MD
Methodist Dallas Medical Center, Department of Gastroenterology, 1441 North Beckley Avenue, Dallas, Texas 75203, United States
Fax: +1-214-947-6701
cassandracraig@mhd.com


Bibliography

DOI: https://doi.org/10.1055/a-1066-4453
Published online: 2019
Endoscopy
© Georg Thieme Verlag KG
Stuttgart - New York
ISSN 0013-726X

Endoscopy E-Videos is a free access online section, reporting on interesting cases and new techniques in gastroenterological endoscopy. All papers include a high quality video and all contributions are freely accessible online.

This section has its own submission website at https://mc.manuscriptcentral.com/e-videos