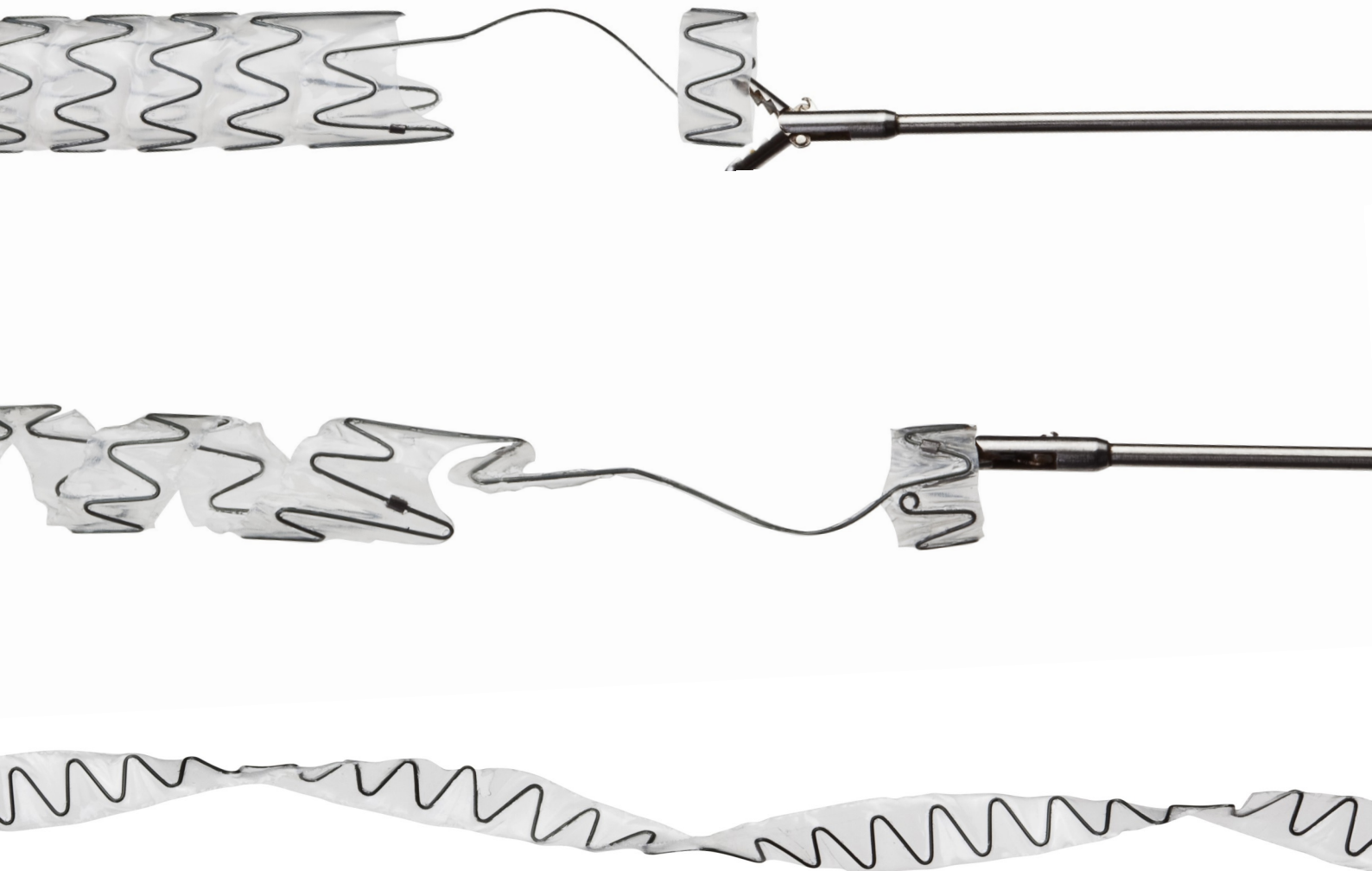


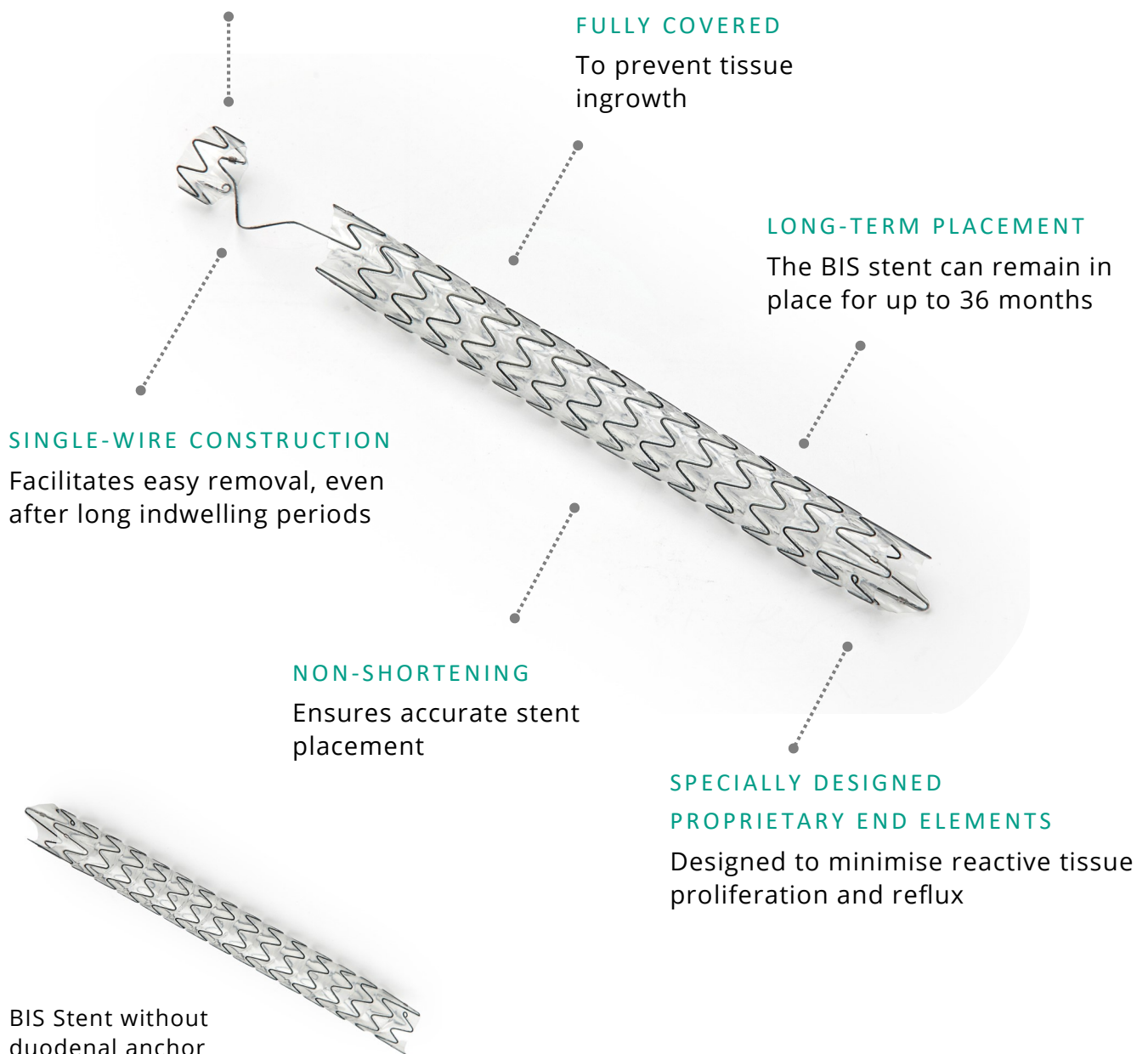
BIS Covered Biliary SEMS



FLEXIBILITY IN THE MANAGEMENT OF BILIARY OCCLUSIONS

DUODENAL ANCHOR MODEL

The BIS stent can be placed without need for papillotomy and is designed to enable simple retrieval and minimise risk of migration



BIS COVERED BILIARY SEMS

PUBLICATION REVIEW

Endoscopic treatment of anastomotic biliary complications after liver transplantation using removable, covered, self-expandable metallic stent.

CAROLA HAAPAMÄKI, MARIANNE UDD, JORMA HALTTUNEN, OUTI LINDSTRÖM, HEIKKI MÄKISALO & LEENA KYLÄNPÄÄ.

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Scandinavian Journal of Gastroenterology. 2012; 47: 116-121.

- The aim of this study was to analyse therapy outcome of post-LT anastomotic complications using cSEMS.
- Seventeen post-LT patients had 29 cSEMS (Allium stent, n=23; Wallstent, n=4; Micro-Tech, n=2) placed during endoscopic retrograde cholangiopancreatography (ERCP).
- The fully covered stents (Allium, Micro-Tech) were placed entirely inside the common bile duct. Data were collected and analysed in a retrospective manner.
- These 17 patients had 19 stent treatment periods. Resolution was eventually established in all patients. There were four (14%) stent migrations. Migration occurred in 1 of 23 Allium BIS cSEMS, 3 of 4 Wallstents and 0 of 2 Micro-Tech stents.
- Pancreatitis was seen after one ERCP procedure, whereas five cases of cholangitis were seen.
- Treatment of post-LT anastomotic complications with cSEMS seems to be both safe and efficient. Further assessment regarding indications, stent types and stenting time is needed.

ORDERING INFORMATION

Endoscopic System without Anchor (190cm)		
Product code	Stent diameter	Stent length
BIS-0-E-10-60	10mm	60mm
BIS-0-E-10-80	10mm	80mm
BIS-0-E-10-100	10mm	100mm
BIS-0-E-10-120	10mm	120mm

Endoscopic System with Anchor (190cm)		
Product code	Stent diameter	Stent length
BIS-A-E-10-60	10mm	60mm
BIS-A-E-10-80	10mm	80mm
BIS-A-E-10-100	10mm	100mm
BIS-A-E-10-120	10mm	120mm

For additional information, or to order one of our products, please call us on
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