

## Introduction

- Single-use duodenoscopes decrease the risk of cross-contamination and can limit costs by eliminating the need for processing and repair.
- The "aScope Duodeno" by Ambu® is a fully disposable, single use duodenoscope, but experience in its use for complex endoscopic retrograde cholangiopancreatography (ERCP) is limited.

## Case

- A 32-year-old female with a history of a Roux-en-Y gastric bypass for obesity, and cirrhosis secondary to alcohol use disorder, status-post liver transplant, presented with ascending cholangitis and choledocholithiasis.
- Initially a percutaneous transhepatic internal-external biliary drain was placed for biliary decompression. To address the obstructive stones, a staged endoscopic ultrasound-guided transgastric ERCP (EDGE) procedure was performed (Fig 1).
- First, a lumen-apposing metal stent (LAMS) was placed to connect the gastric pouch and the bypassed stomach. Two weeks later, an ERCP was performed through the LAMS using a traditional, reusable duodenoscope. (Fig 2-A).
- Given persistent elevation in alkaline phosphatase and concern for a retained biliary stone, the patient underwent a repeat ERCP in three weeks.

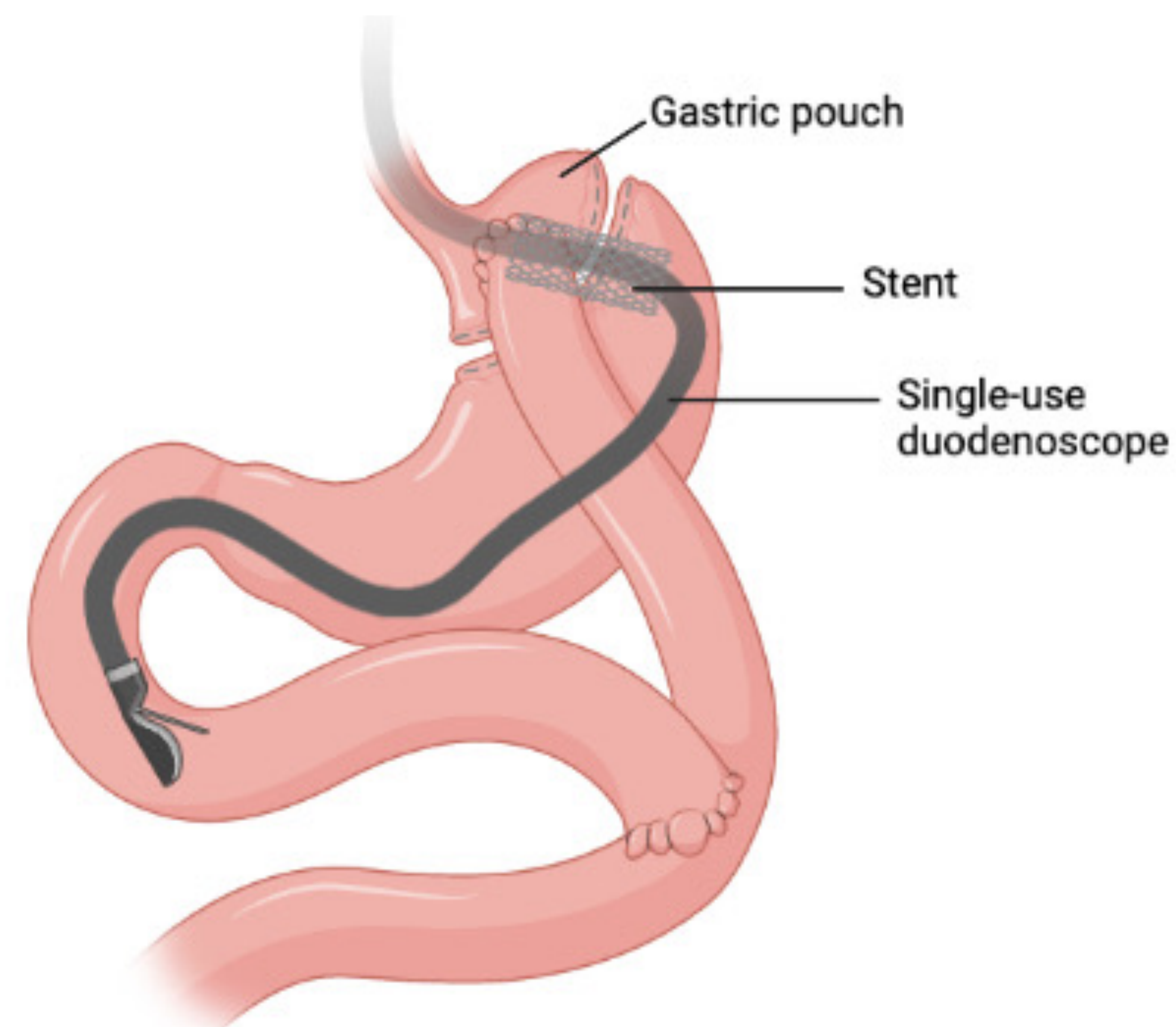


Figure 1 | Illustration of endoscopic ultrasound-guided transgastric ERCP (EDGE) procedure in a patient with a history of Roux-en-Y gastric bypass procedure.

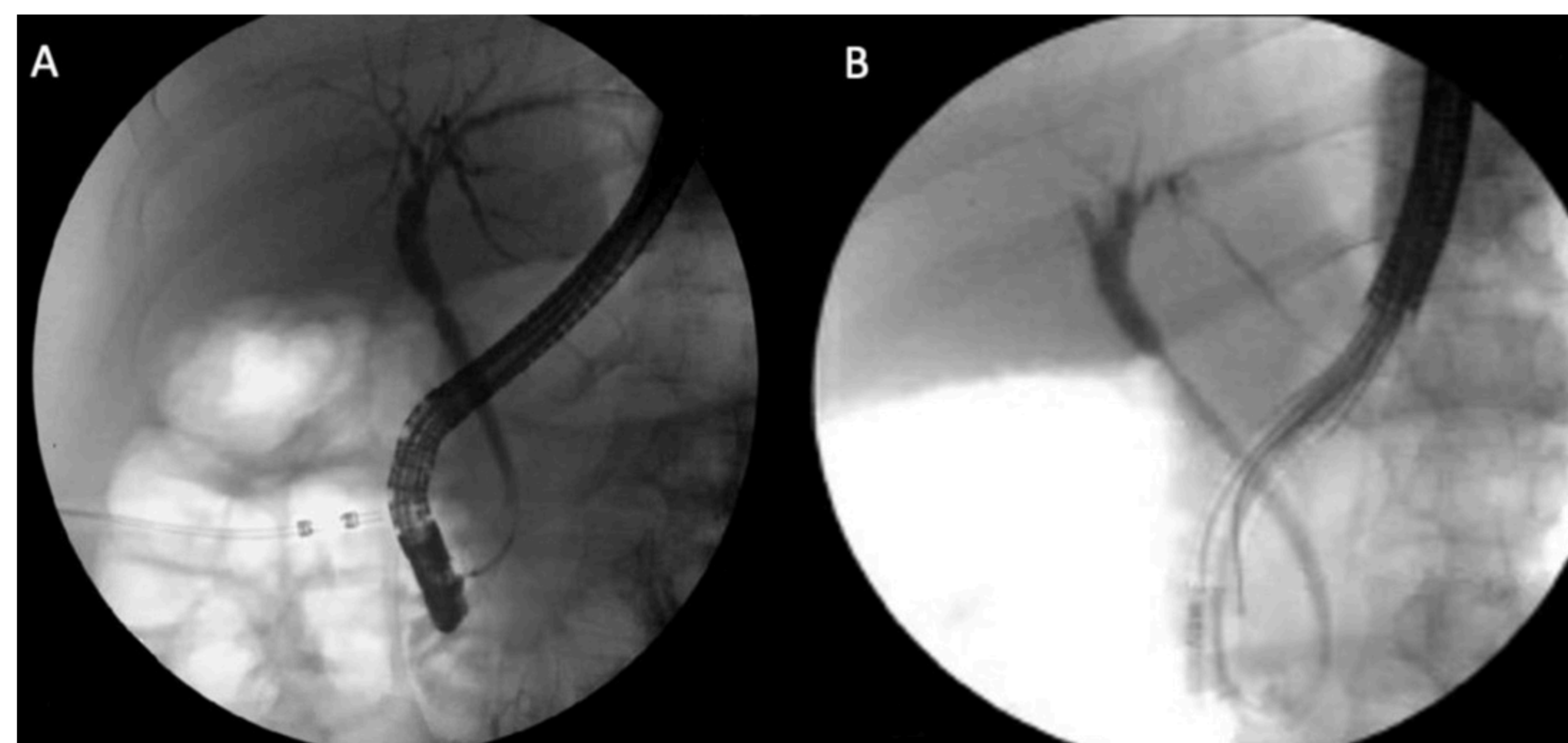


Figure 2 | (A) Traditional endoscope being used to extract stones (B) aScope Duodeno being used to fully clear the biliary ducts on follow-up ERCP with transparent distal end under fluoroscopy.

## Case

- This time, the Ambu® single use duodenoscope was advanced through the LAMS to the level of ampulla. Balloon sweep of the CBD was unremarkable for residual stones or debris. (Fig 2- B).
- Due to the high flexibility of the scope and its light weight, the procedure was performed with technical ease.
- As the distal portion of the insertion tube and the flexible portion of the Ambu® scope are transparent under fluoroscopy, an unobstructed cholangiogram was obtained with minimal contrast and limited need to maneuver the scope.
- The LAMS was then removed, and the iatrogenic gastro-gastric fistula was closed with an endoscopic tacking system.

## Conclusions

- The single use aScope Duodeno can provide advantages in endoscopic retrograde pancreatography with limitations in maneuverability, as shown in this procedure in a patient with a Roux-en-Y gastric bypass performed through a LAMS-based iatrogenic gastro-gastric fistula.

## Disclosures

- Figure 1 was created using BioRender®
- Basim Ali, Tara Keihanian: None
- Wasif Abidi: Ambu USA (Consultant), Apollo Endosurgery (Consultant), ConMED (Consultant), GI dynamics (Grant/Research Support)

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