

Physician Experience with the Acrobat Calibrated Tip Wire Guide

The new Acrobat wire guide was designed help clinicians reliably gain initial cannulation and/or traverse difficult strictures, attributes that can lead to successful patient outcomes. Two noted endoscopic experts recently shared their clinical experiences with the Acrobat:



*Adam Slivka, MD, PhD
Professor of Medicine
Associate Chief, Clinical Services
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"Trust me, if you are pressure injecting doing an occlusion cholangiogram and you don't get anything across, that's a tight stricture (Figure 1) and these are patients getting PTCs.

These are patients that need revisions. We were able to get across. You can appreciate a pretty significant anastomotic stricture (Figure 2). That's the ultimate test for the wire [Acrobat] and it passed."



Figure 1



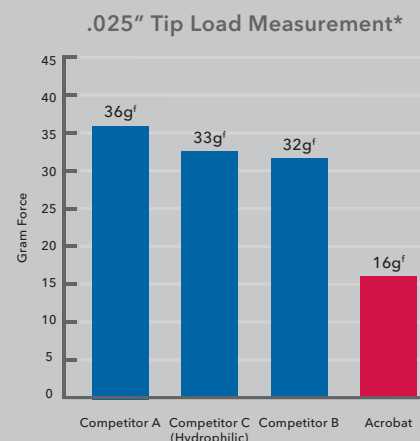
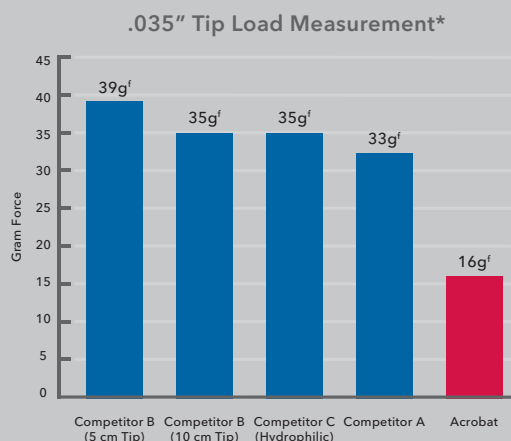
Figure 2



*Stuart Sherman, MD
Professor of Medicine & Radiology
Clinical Director, Gastroenterology/
Hepatology & Director of ERCP
Glen A. Lehman Professor of
Gastroenterology
Indiana University
Indianapolis, IN*

"The Acrobat wire represents a significant advance in guidewire technology. It can be used in both the pancreatic duct and biliary tree.

The wire has a strong body, which makes it easily pushable through strictures and for ductal cannulation. The tip is quite flexible making it able to negotiate a tortuous pancreatic duct and avoid entry into side branches. Finally it is quite radiopaque making it easily visible on fluoroscopy."



*Data on file at Cook Medical.