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Summary

Introduction: Are you stuck in the biliary cannulation nightmare: Wake up, here comes the sun

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This educational session addresses difficult biliary cannulation scenarios in ERCP, emphasizing the need for multiple backup plans and adaptive strategies when standard approaches fail.

KEY POINTS

- Cannulation remains the mainstay of ERCP and without it the procedure cannot be performed, making it critical to have multiple alternative strategies ready
- The speaker emphasizes that cannulation is a dynamic condition requiring endoscopists to always prepare plan A, B, C, and potentially D, E, F when encountering difficulties
- Key factors in choosing the best approach include the clinical setting, the endoscopist's technical skills, ability to perform macro and micro movements, and knowledge of available technical innovations
- Each cannulation action carries complication risk, and the speaker states that the harder the case becomes, the more complications can occur
- The session covers specific challenging scenarios including type two papilla described as tiny and among the most difficult, and includes discussion of multidisciplinary approaches to difficult cases

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