TC-325 appears highly effective in achieving initial hemostasis [1–5], yet technical difficulties related to the first-generation delivery system have included blockage of the 10-Fr catheter or the accessory channel of the endoscope if there is premature contact with moisture. Initial flushing of the accessory channel with air using a syringe before introduction of the catheter is thus recommended. Additional limitations include kinking of the delivery system’s soft catheter sheath when the endoscope is looped or positioned over a duodenoscope elevator. Recently, 7-Fr and 10-Fr catheters have been marketed as part of a second-generation delivery system. TC-325 powder application so far appears quite safe, with no reported bowel obstruction or systemic embolization [1–5]. Here we have reported transient biliary obstruction following successful use of Hemostay in post-sphincterotomy hemorrhage. Caution should therefore be taken when applying hemostatic powders near small orifices adjacent to the bowel lumen.

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