

### Picture of The Issue



Showing the Tape Worm in Duodenum found Incidentally During ERCP Procedure performed by Professor Dr Muhammad Umar, Vice Chancellor RMU

A 50-year-old male presented with jaundice, abdominal pain, and fever. Liver function tests showed cholestatic pattern, and ultrasound revealed biliary obstruction. Endoscopic Retrograde Cholangiopancreatography (ERCP) detected a long, segmented tapeworm in the common bile duct. The worm was extracted using a balloon. The patient was treated with albendazole and praziquantel to prevent recurrence. He improved symptomatically and was discharged with follow-up. Tapeworm infestation, though rare, should be considered in endemic areas. Early ERCP intervention and antiparasitic treatment are essential to prevent complications like recurrent cholangitis and pancreatitis.