

NOVEL 'CLIP WITH LINE PULLEY SECURING'(CLIPS) CLOSURE TECHNIQUE FOR LARGE DEFECTS AFTER COLORECTAL ENDOSCOPIC SUBMUCOSAL DISSECTION

Ken Ohata

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Poster

Colorectal

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A retrospective study of 53 patients reports that the Clip with Line Pulley Securing (CLiPS) technique achieved 94.3% complete closure of large mucosal defects following colorectal endoscopic submucosal dissection.

KEY POINTS

- Complete closure was achieved in 94.3% of cases (50 of 53 patients) with a mean defect size of 48.2 ± 18.8 mm and median closure time of 14 minutes (range 5-58 minutes).
- The CLiPS technique uses a clip with nylon line deployed on ulcer edges, approximated via external counter traction, with an endoloop deployed to fix the line and create a pulley system before final closure with conventional clips.
- Adverse events included one case each of delayed bleeding and perforation, both managed by endoscopic clipping.
- The lesions treated included adenomas (50.9%) and carcinomas (47.2%), located in the right colon (47.1%), left colon (34%), and rectum (18.9%).
- The authors suggest this technique may be a safe and effective closure method for large post-ESD colorectal defects, though prospective studies are needed for wider validation.

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