

EFFICACY OF ENDOLUMINAL VACUUM THERAPY FOR THE TREATMENT OF A RECTAL LEAK AFTER ENDOSCOPIC SUBMUCOSAL DISSECTION: A CASE REPORT

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Poster

Colorectal

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A 43-year-old woman with delayed perforation and sepsis following rectal endoscopic submucosal dissection was successfully managed with endoluminal vacuum therapy, achieving complete closure at 1.5 months.

KEY POINTS

- Endoscopic submucosal dissection of a 90mm rectal laterally spreading tumor was complicated by deep muscularis propria laceration, and the patient developed sepsis the following day with a 12mm perforation communicating with a 15mm abscessed cavity.
- Endoluminal vacuum therapy was initiated using a 2cm Endo-SPONGE with twice weekly replacements over four substitutions, combined with parenteral nutrition and antibiotics.
- Treatment resulted in sepsis resolution, cavity reduction, complete tissue granulation, and complete closure at 1.5 months follow-up with discharge after 16 days.
- This case may be relevant to gastroenterologists managing post-ESD complications and considering endoluminal vacuum therapy for delayed perforations.

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