An over-the-scope clip placed for large colonic perforation can be complicated by delayed bleeding despite its known hemostatic mechanical effect

The efficacy and safety of the over-the-scope clip (OTSC) to manage acute gastrointestinal defects have been demonstrated for several years [1]. Data have shown a technical success rate of almost 100% [2], with very good safety [3]. The most common complication after the use of an OTSC for acute gastrointestinal defects is peritonitis, which occurs when leaks remain [4]. We present a case of delayed bleeding after the closure of an iatrogenic colonic perforation with an OTSC (Video 1).

A 48-year-old woman underwent a colonoscopy to rule out a colorectal tumor in the context of paraneoplastic polymyositis with severe malnutrition and ongoing corticosteroid therapy over several days. The colonoscopy was complicated by a sigmoid perforation caused by the scope (>1 cm). This iatrogenic perforation was managed as per procedure by placement of an OTSC, with technical success. No surgery was necessary in the aftermath. However, 6 days after the successful closure, the patient developed hematochezia and a fall in her hemoglobin was noted. At the time, she was receiving ongoing anticoagulation for a mechanical mitral valve. A second endoscopy confirmed that there was bleeding at the site of the OTSC (Fig. 1a). In fact, an enlarged pulsating vessel with active non-pulsating bleeding could be seen in the middle of the clip teeth (Fig. 1b, c). Hemostasis was achieved with hot biopsy forceps coagulation (Fig. 1d).

This case highlights an unusual outcome of an OTSC that has not been well described in safety studies [4]. Furthermore, it is important to be aware of this surprising cause of bleeding, even though OTSCs are well known for their use in controlling bleeding.

In conclusion, bleeding can be a complication of an OTSC and it can present in a delayed manner. Despite the hemostatic...
features of OTSCs, it is important to do a second-look endoscopy to re-examine the OTSC site in patients who present with delayed bleeding.

Competing interests
None

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