Endoscopic submucosal dissection of colonic residual laterally spreading tumor with adaptive traction: use of the additional loops to improve traction focally in difficult area

Multipolar traction is a recent advance in colorectal endoscopic submucosal dissection (ESD) to expose the submucosal field [1] particularly for challenging lesions like residual lesions [2]. Nevertheless, two limitations exist with four-point traction. First, traction tends to reduce as ESD progresses, although new devices that can be stretched during the procedure to increase traction seem promising [3, 4]. Second, systematically placing four traction points is expensive (four clips), time-consuming, and not needed for lesions <4 cm. For small lesions, two-point adaptive traction seems sufficient, but additional focal traction on the difficult area could help the physician.

We developed a traction device (A-TRACT 2+2, Hospices Civils de Lyon) (Fig. 1) with two adjustable loops with a tightening link and two additional large loops that can be used to stretch any part of the lesion when the procedure is in progress.

We report here the case of a 66-year-old patient with a 4-cm residual non-granular laterally spreading tumor in the transverse colon previously resected partially by endoscopic mucosal resection (EMR). After complete circumferential incision and trimming, we fixed the device by catching the two adjustable loops (Video 1); the rubber band was then attached to the opposite wall. Afterward, ESD began but one clip was snatched out when the system was tightened, with the remaining traction on a single point. ESD became difficult because of a severe fibrosis, and additional traction was needed. Therefore, we caught the two additional loops (Video 1); the rubber band was then attached to the opposite wall. The loop fixed on the right edge where fibrosis was severe was the most help. We achieved an R0 resection without an adverse event.

In conclusion, this device allows adjustable traction with the capability to add traction at the difficult area using the additional loops on the device.

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Competing interests

Our institution Hospices civils de Lyon has deposited a patent on this device.

The authors

Clara Yzet1, Louis-Jean Masgnaux1, Jérôme Rivory1, Timothée Wallenhorst2, Alexandru Lupu1, Jérémie Jacques3, Mathieu Pioche1
1 Gastroenterology and Endoscopy Unit, Edouard Herriot Hospital, Hospices Civils de Lyon, Lyon, France
2 Gastroenterology and Endoscopy Unit, Pontchaillou University Hospital, Rennes, France
3 Gastroenterology and Endoscopy Unit, Dupuytren University Hospital, Limoges, France
Corresponding author

Mathieu Pioche, MD
Endoscopy Unit, Department of Digestive Diseases, Pavillon L, Edouard Herriot Hospital, 69437 Lyon Cedex, France
mathieu.pioche@chu-lyon.fr

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