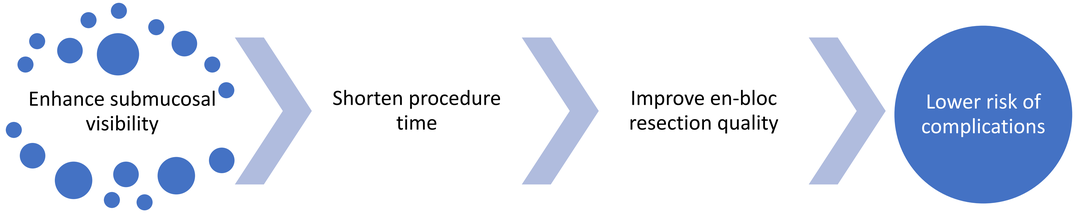
External Dynamic Traction for Endoluminal Resection of an Ascending Colon Lesion

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Background

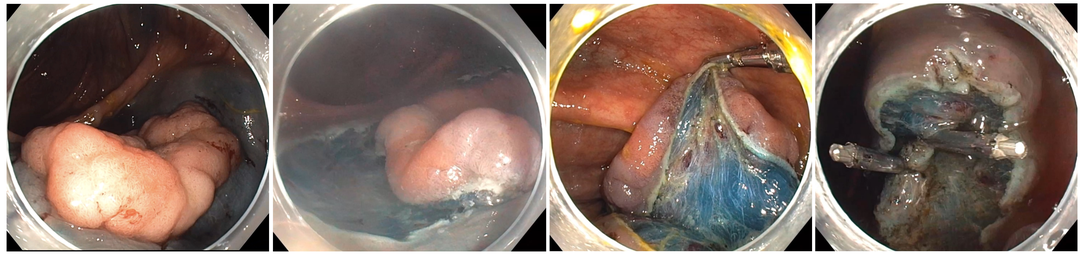
Endoscopic Submucosal Dissection (ESD) stands out as a superior method for excising large, intricate colon lesions, enabling higher en-bloc resection with local recurrence rates (1). Despite its merits, ESD's technical intricacies and time-intensive nature often stem from inadequate traction-countertraction (2).

Objectives/Purpose



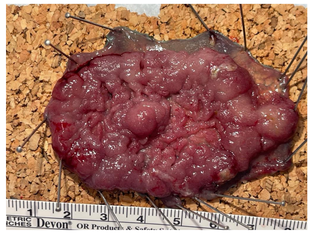
Intervention

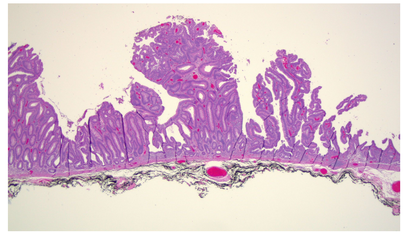
The patient, with a 70mm LST in the ascending colon, was referred to our ELS center for ESD. The procedure commenced with distal cap attachment at the end of the PCF-190 HQL C-scope (Olympus America, Center Valley, PA), followed by a comprehensive colonoscopy. Subsequently, 75 mL of EndoClot® Solution (EndoClot Plus Co., Ltd., Santa Clara, CA) facilitated optimal mucosal elevation. A circumferential mucosal incision was executed using the ORISE™ ProKnife 2.0mm electrosurgical knife (Boston Scientific, Marlborough, MA).
The scope was then retracted to introduce the DiLumen C1® Platform (Lumendi, Westport, CT, USA) over the scope, subsequently reintroduced via the anus. The C-scope and platform were precisely positioned at the lesion site, and a grasper was advanced through the platform's channel. The articulating tip of the grasper facilitated the grasping and retraction of the incision edge, providing optimal traction.



Outcome

This enabled swift and precise dissection, culminating in a remarkably efficient procedure duration of 49 minutes considering the large size of the lesion. The patient was discharged on the same day without complications. Histopathological analysis revealed a tubulovillous adenoma with focal high-grade dysplasia, with all margins confirmed as clear.





Conclusion

Our preliminary findings suggest that the implementation of the Dilumen C1® Platform can effectively enhance traction-countertraction, potentially reducing procedural time in the treatment of LSTs. Subsequent investigations will be instrumental in ascertaining the consistency of these outcomes and evaluating the platform's potential to facilitate widespread adoption of ESD.



References

1. Fujiya M, Tanaka K, Dokoshi T, et al. Efficacy and adverse events of EMR and endoscopic submucosal dissection for the treatment of colon neoplasms: a meta-analysis of studies comparing EMR and endoscopic submucosal dissection. *Gastrointest Endosc*. 2015;81(3):583-595.
2. Tatar C, Ozgur I, Sapci I, Catalano B, Liska D, Gorgun E. Endoluminal Surgery Using a New Enabling Platform With Working Channels to Facilitate Endoscopic Submucosal Dissection in the Treatment of Complex Colorectal Lesions. *Dis Colon Rectum*. 2022;65(12):e1074-e1078.