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Images in gastroenterology

Underwater endoscope cleaning method for use during COVID-19

Yasuaki Nagami ^{a,*}, Hiroko Endo ^b, Yasuhiro Fujiwara ^a^a Department of Gastroenterology, Osaka City University Graduate School of Medicine, Japan^b Department of Nursing, Osaka City University Hospital, Japan

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Although few reports have described methods for cleaning endoscopes that can be used during the coronavirus disease 2019 (COVID-19) pandemic, many reports regarding personal protective equipment (PPE) and caution during endoscopic procedures have been published [1–3]. Some guidelines recommended flushing and brushing all accessible channels to remove all organic and other residues [4,5], but brushing can create droplets and aerosols that can increase the risk of infection with SARS-CoV-2.

Here, we introduce a safer underwater cleansing and brushing technique that can minimise the spread of aerosols when cleaning endoscopes that have been used for patients with COVID-19 (Video S1). After endoscopic procedures, the endoscope is wrapped

in a plastic bag, which is immersed in an enzymatic detergent solution in a sink cabinet (Fig. 1A). The endoscope is then removed from the plastic bag and placed in the solution (Fig. 1B). Next, a syringe is used to flush accessible channels with the enzymatic detergent solution, after which the endoscope is brushed while submerged in the solution (Fig. 1C). The endoscope surface is cleaned with a neutral detergent using a sponge before an automatic flushing device is used (Fig. 1D). We have not tested aerosol spread ranges for this method, but this appears to be a safe, easy, and quick method to prevent infection during COVID-19. In addition, this technique may be useful even when appropriate PPE is unavailable.

* Corresponding author at: Department of Gastroenterology, Osaka City University Graduate School of Medicine, 1-4-3, Asahimachi, Abeno-ku, Osaka 545-8585, Japan.
E-mail address: yasuaki1975@hotmail.com (Y. Nagami).



Fig. 1. A: The endoscope is wrapped in a plastic bag, which is immersed in an enzymatic detergent solution. B: The endoscope is removed from the plastic bag. C: The endoscope is brushed while submerged in the enzymatic detergent solution. 1D: The endoscope surface is then cleaned with neutral detergent using a sponge.

Declaration of competing interests

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.ajg.2021.12.007>.

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