E-Videos

latrogenic colonic perforation closure with an over-the-scope clip applied with a gastroscope 4 hours after index colonoscopy



Endoscopic treatment of colonic acute iatrogenic perforations (AIPs) recognized during or shortly after the procedure has been recommended as a firstline approach [1-5], even for perforations occurring during diagnostic colonoscopies, which are considered larger than those occurring during therapeutic colonoscopies. However, the approximate time frame has not been defined. Experts recommend the marginal time of 4 hours after the colonoscopy. We report the closure of an AIP with an overthe-scope (OTS) clip, mounted on a gastroscope, 4 hours after the endoscopic view of the defect.

A 71-year-old woman was referred to our unit for treatment of a full-thickness AIP at the sigmoid colon, endoscopically diagnosed 4 hours earlier during a screening colonoscopy. Initially, through-thescope clips were used by the endoscopist to close the defect. However, the closure was not considered secure and the patient was referred to our hospital. The abdominal computed tomography scan revealed the presence of extraluminal gas without presence of colonic contents. Despite the patient's good general condition, we decided to proceed with a new colonoscopy.

A 1.5 cm defect was identified at the sigmoid colon and it was decided to attempt closure using an OTS clip (▶ Fig. 1). However, advancement of the mounted colonoscope was impossible due to adhesions. It was therefore decided to attempt application of an OTS clip with smaller diameter and mounted on the tip of a gastroscope. The mounted gastroscope was advanced to the perforation site and the clip was applied, closing the defect (▶ Fig. 2, ▶ Video 1). The patient was uneventfully discharged 3 days later.

What does this case add? First, it might be reasonable to attempt the endoscopic closure of a colonic AIP, even in the marginal time frame of 4 hours. Second,



▶ **Fig. 1** A defect in the sigmoid colon.



▶ Fig. 2 The over-the-scope clip in place.





▶ Video 1 latrogenic colonic perforation closure with an over-the-scope clip applied with a gastroscope.

gastroscope-assisted OTS clip placement could be considered as a rescue treatment for cases with difficulty in accessing the colonic defect.

Endoscopy_UCTN_Code_CPL_1AJ_2AG

Competing interests

The authors declare that they have no conflict of interest.

The authors

Pinelopi Nicolaou¹, Magdalini Velegraki¹, Despoina Arna¹, Andrew Psistakis¹, Emmanouil Bachlitzanakis², Matthaios Flamourakis², Gregorios A. Paspatis¹

- Department of Gastroenterology, Benizelion General Hospital, Heraklion, Crete, Greece
- 2 Department of Surgery, Benizelion General Hospital, Heraklion, Crete, Greece

Corresponding author

Gregorios A. Paspatis, MD, PhD

Department of Gastroenterology, Benizelion General Hospital, L. Knossou, Heraklion, Crete, 71409, Greece gpaspatis@gmail.com

References

- [1] Derbyshire E, Hungin P, Nickerson C et al. Colonoscopic perforations in the English National Health Service Bowel Cancer Screening Programme. Endoscopy 2018; 50: 861–870
- [2] Khater S, Rahmi G, Perrod G et al. Over-thescope clip (OTSC) reduces surgery rate in the management of iatrogenic gastrointestinal perforations. Endosc Int Open 2017; 5: E389–E394
- [3] Paspatis GA, Arvanitakis M, Dumonceau JM et al. Diagnosis and management of iatrogenic endoscopic perforations: European Society of Gastrointestinal Endoscopy (ESGE) position statement update 2020. Endoscopy 2020; 52: 792–810

- [4] Paspatis GA, Fragaki M, Velegraki M et al. Paradigm shift in management of acute iatrogenic colonic perforations: 24-year retrospective comprehensive study. Endosc Int Open 2021; 9: E874–E880
- [5] Kothari ST, Huang RJ, Shaukat A et al. ASGE review of adverse events in colonoscopy. Gastrointest Endosc 2019; 90: 863–876

Bibliography

Endoscopy 2022; 54: E1068–E1069 DOI 10.1055/a-1889-5278 ISSN 0013-726X published online 25.8.2022 © 2022. The Author(s).

This is an open access article published by Thieme under the terms of the Creative Commons Attribution-NonDerivative-NonCommercial License, permitting copying and reproduction so long as the original work is given appropriate credit. Contents may not be used for commercial purposes, or adapted, remixed, transformed or built upon. (https://creativecommons.org/licenses/by-nc-nd/4.0/)
Georg Thieme Verlag KG, Rüdigerstraße 14, 70469 Stuttgart, Germany



ENDOSCOPY E-VIDEOS https://eref.thieme.de/e-videos



Endoscopy E-Videos is an open access online section, reporting on interesting cases

and new techniques in gastroenterological endoscopy. All papers include a high quality video and all contributions are freely accessible online. Processing charges apply (currently EUR 375), discounts and wavers acc. to HINARI are available.

This section has its own submission website at https://mc.manuscriptcentral.com/e-videos