

<b>Products</b>	Padlock Clip® defect closure system
<b>Procedural Area</b>	Hemostasis
<b>Article</b>	Endoscopic closure of anterior resection anastomotic dehiscence using Padlock Clips®
<b>Publication</b>	<i>Gut</i> 2018; Volume 67: Abstract 46
<b>URL</b>	<a href="https://gut.bmj.com/content/67/Suppl_1/A46.1">https://gut.bmj.com/content/67/Suppl_1/A46.1</a>
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<b>Purpose</b>	Present a case of successful closure of anastomotic leak using the Padlock Clip® defect closure system
<b>Key Points</b>	<p><u>Disease Background</u></p> <ul style="list-style-type: none"> <li>Anastomotic dehiscence is a serious complication of anterior resections. The risk of developing an anastomotic leak after an anterior resection has been reported to be as high as 23%</li> <li>Surgical 'divert and drain' has been the standard treatment for these cases (as was done in this case before use of the Padlock Clip® defect closure system)</li> </ul> <p><u>Patient History</u></p> <ul style="list-style-type: none"> <li>73-year-old male developed an anastomotic leak 5 days after having an anterior colon resection operation to remove cancer from his colon</li> <li>Emergency surgery was performed, where an ileostomy was formed so that the GI waste would be diverted from the leakage site. Drains were inserted to remove any fluid that had collected post-surgery and from the anastomotic leak site.</li> <li>During the surgery, through-the-scope endoscopic clips were deployed to close the defect, but they were unsuccessful in closing the leak</li> </ul> <p><u>Treatment with the Padlock Clip® defect closure system</u></p> <ul style="list-style-type: none"> <li>Two weeks later, fecal matter was noted in one of the drains, and a flexible sigmoidoscopy identified a full thickness 2cm defect in the anastomosis</li> <li>3 Padlock Clip® defect closure systems along with 3 through the scope clips closed the defect</li> </ul>
<b>Conclusions</b>	Padlock Clip® defect closure system can be successfully used to close chronic full thickness defects
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