<table>
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<th>Products</th>
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<td>Procedural Area</td>
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<td>Endoscopic Closure of Persistent Anastomotic Leaks Using the US Endoscopy Padlock® Over-the-Scope Clip</td>
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<td>URL</td>
<td><a href="https://www.eventscribe.com/2018/ACG/ajaxcalls/PosterInfo.asp?efp=RFNSWFFHSFY2NDI0&amp;P%E3%82%B9%E3%82%BF%E3%83%BCID=160176&amp;rnd=0.4100367">https://www.eventscribe.com/2018/ACG/ajaxcalls/PosterInfo.asp?efp=RFNSWFFHSFY2NDI0&amp;PスターID=160176&amp;rnd=0.4100367</a></td>
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<tr>
<td>Author</td>
<td>Zhibo An, MD, PhD; Abdul Haseeb Shehzad, MD; Amit Gajera, MD</td>
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<td>Purpose</td>
<td>Present cases of anastomotic leaks that were treated by the Padlock Clip® defect closure system</td>
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**Key Points**

**Disease Background**
- Persistent anastomotic leaks are a serious surgical complication with significant morbidity and mortality
- These leaks are typically treated by draining fluid collection and performing surgical revision

**First Case**
- 57-year-old man with sigmoid adenocarcinoma had a laparoscopic left hemicolectomy performed to remove the affected bowel. The anastomosis site dehisced causing a fluid collection and a percutaneous drain was placed
- A fistula connecting the proximal sigmoid anastomosis site to the retroperitoneum was identified
- Multiple Padlock Clip® defect closure systems were used to close the defect and there were no signs of a leak on follow-up examination

**Second Case**
- 54-year-old man with Lynch Syndrome and colon cancer had a total colectomy
- The resulting anastomosis between the small intestine and the rectum developed a leak along the staple line requiring the subsequent fluid collection to be drained
- Two defects were identified upon examination of the site. A Padlock Clip® defect closure system clip was deployed on each of the defects and no leak was seen on follow-up.

**Third Case**
- 55-year-old man with perforated sigmoid diverticulitis had a diverting colostomy performed with eventual take down of the ostomy site. After reconnection of the two ends of the bowel was completed, an anastomotic leak occurred, creating multiple pelvic abscesses which needed to be drained.
- A 2cm defect was identified near the anastomosis and closed with 2 Padlock Clip® defect closure system clips.
- Follow-up confirmed closure of the defect.

**Fourth Case**
- 48-year-old woman had a sigmoid colectomy to treat her sigmoid adenocarcinoma. The patient developed peritonitis and an anastomotic leak. Diverting loop ileostomy was performed.
- The anastomosis was investigated and a 2mm leak was identified and closed using the Padlock Clip® defect closure system.
- Follow-up confirmed closure of the defect

**Conclusions**

"[The Padlock Clip® defect closure system] is easy to use, minimally invasive, and cost effective, therefore should be considered as an alternative to surgery for closure of anastomotic leaks and fistulae within the GI tract"

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