

<b>Products</b>	Padlock Clip® defect closure system
<b>Procedural Area</b>	Hemostasis
<b>Article</b>	A novel method for closure of a persistent gastrostomy feeding site fistula
<b>Publication</b>	<i>Endoscopy</i> 2015; 47(S 01): E629-E630
<b>URL</b>	<a href="https://www.thieme-connect.de/products/ejournals/abstract/10.1055/s-0034-1393588">https://www.thieme-connect.de/products/ejournals/abstract/10.1055/s-0034-1393588</a>
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<b>Purpose</b>	Share the use of the Padlock Clip® defect closure system to manage a gastrocutaneous fistula
<b>Key Points</b>	<p><u>Disease Background</u></p> <ul style="list-style-type: none"> <li>• After removal of a gastrostomy tube, the fistula tract can become 'persistent' if gastric contents leak out of the fistula for more than 1 month. These fistulas become persistent in about 1/3 of patients</li> <li>• Surgery had been the traditional treatment for these fistulas, but several endoscopic closure methods have been emerging</li> </ul> <p><u>Patient History</u></p> <ul style="list-style-type: none"> <li>• 22-year-old male with prior conditions that required him to have a feeding tube for many years had gastric leakage from a gastrocutaneous fistula 2 years after feeding tube removal</li> <li>• A prior attempt to close the fistula with through-the-scope clips was unsuccessful</li> </ul> <p><u>Treatment with the Padlock Clip® defect closure system</u></p> <ul style="list-style-type: none"> <li>• The fistula tract was confirmed with contrast and endoscopy</li> <li>• The tract was cauterized with a silver nitrate stick prior to use of the Padlock Clip® defect closure system</li> <li>• The fistula and surrounding mucosa were suctioned in the tissue chamber and the Padlock Clip® defect closure system deployed</li> <li>• No gastric leakage or pain was reported at 6-month follow-up</li> </ul>
<b>Conclusions</b>	The use of the Padlock Clip® defect closure system is an effective option for closure of a persistent gastrocutaneous fistula
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