

TECHNIQUE SPOTLIGHT

Endoscopic Resection of Large Pedunculated Colon Polyps Using Only a Scissor-Type Knife (ClutchCutter®)

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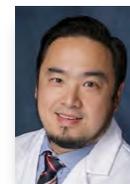
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ClutchCutter

En bloc resection of certain large pedunculated colon polyps (PCPs) can be technically challenging with conventional snare polypectomy, and carries well-recognized risk of clinically significant bleeding. The optimal strategy for *en bloc* resection of large PCPs thus remains in question.

Two patients were referred to us for attempts at *en bloc* resection of large PCPs with wide stalks. Both were found during routine colorectal cancer screenings. Attempts to maneuver a snare around the head of the PCP for *en bloc* resection were unsuccessful and thereby, in both cases, the decision was made to attempt Endoscopic Submucosal Dissection (ESD) using a scissor-type knife, ClutchCutter® (Fujifilm Medical Systems USA, Inc.).

The insulated rotatable blades of the ClutchCutter promoted safe and precise dissection of the stalks under direct visualization. The thicker and fully serrated ClutchCutter jaws allowed for adequate hemostasis of large submucosal vessels, circumventing the need to place a loop ligating device. Both polyps were successfully resected *en bloc* using only the scissor-type knife with procedure times less than 20 minutes, and with no complications experienced.

Histopathology of both polyps were consistent with tubulovillous adenoma; with resection margins free of dysplasia, consistent with curative R0 resection.

Employing this technique, the use of the ClutchCutter allows for efficient *en bloc* resection of large PCPs that would otherwise be quite difficult to resect *en bloc* via standard snare polypectomy. Future studies are needed to further corroborate the efficacy and safety of this device for the resection of selected colorectal lesions. In the interim, we will likely continue using the ClutchCutter to perform efficient ESD of large PCPs, as it provides an opportunity for curative resection.