Endoscopic closure of an artificial defect after colorectal endoscopic submucosal dissection (ESD) is useful in preventing adverse events [1], with several closure methods having been developed [2,3]. While the use of traction facilitates ESD [4], no devices currently exist that can facilitate both traction and closure. An elastic thread delivery hood (Dual Traction Hood; Adachi Co., Ltd., Osaka, Japan and Nomura Medical Device Co., Ltd., Nagano, Japan) that has dual threads with multi-rings inside the cap has been developed for traction use (Fig. 1) [5]. We describe a case in which this device was used successfully for traction as well as closure in a rectal ESD (Video 1).

A 65-year-old man presented with a rectal neuroendocrine tumor (▶Fig. 2) [6]. Rectal ESD was performed using a Dual Traction Hood as follows. The first thread was used for the traction. After a submucosal pocket was created followed by a whole circumferential incision, the thread was released from the hood using a hemoclip (HX-610-090; Olympus, Tokyo, Japan). Using hemoclips, the thread was then fixed to the edge of the pocket and opposite the normal mucosa (▶Fig. 3). Traction-assisted ESD was completed successfully, leaving an artificial defect 30 mm wide (▶Fig. 4).
The second thread was used to close the defect post-ESD. One ring of the thread was anchored to the defect edge using a hemoclip, and another ring was anchored to the opposite edge. The procedure was repeated in a zig-zag pattern while the thread was attached to both edges. Consequently, the defect was approximated by these hemoclips. Complete closure was achieved using additional hemoclips.

**Competing interests**

The authors declare that they have no conflict of interest.

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