A novel through-the-scope twin clip or dual action tissue closure device (TTS-TC or DAT Closure Device; Micro-Tech Co. Ltd., Nanjing, China) was first reported by us [1,2]. We have previously performed endoscopic gastric bypass using TTS-TCs in a live pig [3]. We have now for the first time performed coloenterostomy, similarly to colonic–small intestinal bypass, in a live pig. The operation steps are shown in Video 1.

First, in the colon approximately 20 cm away from the anus, a colonic opening was made into the abdominal cavity (opening 1) using endoscopic full-thickness resection (Fig. 1a). Next, a TTS-TC was delivered into the abdominal cavity through the endoscope working channel, and the small intestinal wall was clamped using one side of the TTS-TC. The clamped intestine was pulled through opening 1 into the colon using the TTS-TC, then the colonic mucosa was clamped using the other side of the TTS-TC to anchor the intestine that had been pulled through into the colon (Fig. 1b). A longitudinal opening (opening 2) was then made in the small intestine anchored in the colon (Fig. 1c). The intestinal wall at the edge of opening 2 was clamped using one side of another TTS-TC and pulled close to the colon at opening 1, before openings 1 and 2 were clamped together using the other side of the TTS-TC (Fig. 1d). Further TTS-TCs were used to continue joining openings 1 and 2, then traditional TTS clips were used to close the remaining wound. A total of nine TTS-TCs and 12 TTS clips were used. The total operation time was 75 minutes. Cephalosporins were administered intramuscularly for 1 week postoperatively.

At 2-month follow-up, no perforation or bleeding had occurred, the wound was healed and the TTS-TCs had fallen off spontaneously. The coloenterostomy had been successfully created.
(▶Fig. 1e): however, further study is needed to optimize the procedure and evaluate its safety and feasibility.

**References**


**Bibliography**

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