Endoscopic submucosal dissection (ESD) requires substantial skill because of the poor visibility in the cutting area. Recently, traction systems for ESD have been reported [1–4], but these complex methods have not been widely employed. We therefore designed the “clip fishing method”, consisting of a threaded sheath clip. The cost is lower than that of “magnetic-anchor-guided” ESD [4].

In this porcine model study we used a two-channel endoscope or a single-channel endoscope with attached working channel. The clip fishing method was tested for use in ESD of 3-cm lesions in six predetermined gastric areas in three porcine stomachs, which were resected with or without use of the clip fishing method. First, long threads were tied to conventional clips (Fig. 1 a). After circumferential incision of the mucosa, the threaded clips were attached to the edge of the exfoliated mucosa and the proximal ends of the lines were tied to the tip of the guide wire in the sheath, e.g., in an endoscopic sphincterotomy knife. The guide wire was then pulled out of the sheath (Fig. 1 c). The proximal threads then selectively pulled the partly mucosal flap lesion. In all three resected porcine stomachs, en bloc resections were successfully completed in a short time. The clip fishing method required 11 minutes 20 seconds ± 2 minutes 2 seconds to dissect the submucosa, while the conventional method required 16 minutes 9 seconds ± 1 minute 50 seconds (P < 0.05). Even one clip was sufficient to lift the mucosal flap in ESD, particularly for tangent line lesions, as deep insertion of the threaded sheath clip was easily able to lift the mucosal flap. Video 1 shows the “clip fishing method” in use in the in vivo study in an anesthetized pig.

Video 1
The “clip-fishing method” in use in vivo in an anesthetized pig.

Competing interests: None

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References
1 Yamamoto H, Kawata H, Sunada K et al. Successful en-bloc resection of large superficial tumors in the stomach and colon using sodium hyaluronate and small-caliber-tip transparent hood. Endoscopy 2003; 35: 690–694

Bibliography
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