



Clinical Case Study

4.5 cm Sessile Rectal Polyp ESD with Speedboat Notch Short & Multimodal Energy

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Introduction: This is a case of a large sessile polyp less than 10cm from the anal verge. The procedure was completed with the Creo Speedboat Notch (Short) and CROMA Advanced Energy Platform, using Adaptive Multimodal Energy.

Patient History

58-year-old female patient presented for screening colonoscopy noted to have a 4.5cm sessile rectal polyp and was referred for ESD of the polyp.



Lobulated polyp 4.5 cm in the rectum

Procedure



One 45mm adenomatous appearing, multilobulated and serrated Paris is polyp in the rectum 5cm from the anal verge. Polyp was sent to me for suspicion of high-grade dysplasia. On observation and examination uniform pit pattern was identified, however with two dominant nodules that have a higher likelihood of malignancy; ESD was chosen as the method of resection.

Lift performed with 30ml of a solution of methylene blue and 6% hetastarch in normal saline injected into the submucosa; completely removed target lesion en-bloc by ESD and retrieved specimen.

Clear-cut demarcation of the lesion was performed prior to procedure. ESD was performed via cap-assisted technique using Creo Medical's Speedboat Notch Short device. Bleeding was not visualized; induced coagulation; applied topical hemostatic agent to control bleeding; hemostasis achieved. Two x 10cc vials of PuraStat was placed via injection catheter.



The Speedboat Notch allowed close dissection of the polyp from the muscle layer, without damaging the muscle. It allowed me to use gravity as traction and freely control the rotation of the device, which was integral to the safety and success of the case.

Speedboat Notch dissection of the polyp using gravity as traction.

Outcome

En-bloc Resection with Pathology noted.

The patient woke up with minimal rectal discomfort which is rare after a 3-hour dissection of the rectum. While she was observed overnight, she complained of no discomfort post procedure and was discharged in the morning to outpatient follow up.



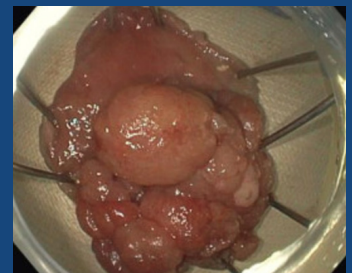
Clean resection base with intact muscle layer

Conclusion

Pathology with tubular adenoma with low grade dysplasia, negative deep and lateral margins.

Clinician Overview & Takeaways

- There were several aspects of the speedboat short notch that were highly advantageous for this clinical case.
- As we were using gravity alone for traction, the short notch allowed for complete physician control over the rotation of the knife, this allowed for faster dissection and therefore a faster case.
- The protective hull allowed close dissection near the muscle layer without causing damage.
- Due to the use of gravity for traction when the Speedboat device was inverted in dissection the hull protected the deep margins of the polyp.
- As with rectal dissections as was with this polyp there was a good amount of bleeding, the Super High Frequency Microwave allowed either excellent pretreatment of vessels or prompt treatment of bleeding at the moment that was bleeding was noted.
- Use of Advanced Bipolar Energy for dissection has the advantage of not heating up the peri-rectal fat and muscle as the energy is restricted to the device.



Resection specimen pinned

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