

World Journal of *Clinical Cases*

World J Clin Cases 2022 November 6; 10(31): 11214-11664



REVIEW

- 11214** Diabetes and skin cancers: Risk factors, molecular mechanisms and impact on prognosis
Dobrică EC, Banciu ML, Kipkorir V, Khazeei Tabari MA, Cox MJ, Simhachalam Kutikuppala LV, Găman MA
- 11226** Endocrine disruptor chemicals as obesogen and diabetogen: Clinical and mechanistic evidence
Kurşunoğlu NE, Sarer Yurekli BP
- 11240** Intestinal microbiota in the treatment of metabolically associated fatty liver disease
Wang JS, Liu JC

MINIREVIEWS

- 11252** Lactation mastitis: Promising alternative indicators for early diagnosis
Huang Q, Zheng XM, Zhang ML, Ning P, Wu MJ
- 11260** Clinical challenges of glycemic control in the intensive care unit: A narrative review
Sreedharan R, Martini A, Das G, Aftab N, Khanna S, Ruetzler K
- 11273** Concise review on short bowel syndrome: Etiology, pathophysiology, and management
Lakkasani S, Seth D, Khokhar I, Touza M, Dacosta TJ
- 11283** Role of nickel-regulated small RNA in modulation of *Helicobacter pylori* virulence factors
Freire de Melo F, Marques HS, Fellipe Bueno Lemos F, Silva Luz M, Rocha Pinheiro SL, de Carvalho LS, Souza CL, Oliveira MV
- 11292** Surgical intervention for acute pancreatitis in the COVID-19 era
Su YJ, Chen TH

ORIGINAL ARTICLE**Clinical and Translational Research**

- 11299** Screening of traditional Chinese medicine monomers as ribonucleotide reductase M2 inhibitors for tumor treatment
Qin YY, Feng S, Zhang XD, Peng B

Case Control Study

- 11313** Covered transjugular intrahepatic portosystemic stent-shunt *vs* large volume paracentesis in patients with cirrhosis: A real-world propensity score-matched study
Dhaliwal A, Merhzad H, Karkhanis S, Tripathi D

Retrospective Cohort Study

- 11325** Endoscopic submucosal tunnel dissection for early esophageal squamous cell carcinoma in patients with cirrhosis: A propensity score analysis
Zhu LL, Liu LX, Wu JC, Gan T, Yang JL

Retrospective Study

- 11338** Nomogram for predicting overall survival in Chinese triple-negative breast cancer patients after surgery
Lin WX, Xie YN, Chen YK, Cai JH, Zou J, Zheng JH, Liu YY, Li ZY, Chen YX
- 11349** Early patellar tendon rupture after total knee arthroplasty: A direct repair method
Li TJ, Sun JY, Du YQ, Shen JM, Zhang BH, Zhou YG
- 11358** Coxsackievirus A6 was the most common enterovirus serotype causing hand, foot, and mouth disease in Shiyan City, central China
Li JF, Zhang CJ, Li YW, Li C, Zhang SC, Wang SS, Jiang Y, Luo XB, Liao XJ, Wu SX, Lin L
- 11371** Dynamic changes of estimated glomerular filtration rate are conversely related to triglyceride in non-overweight patients
Liu SQ, Zhang XJ, Xue Y, Huang R, Wang J, Wu C, He YS, Pan YR, Liu LG
- 11381** C-reactive protein as a non-linear predictor of prolonged length of intensive care unit stay after gastrointestinal cancer surgery
Yan YM, Gao J, Jin PL, Lu JJ, Yu ZH, Hu Y

Clinical Trials Study

- 11391** Dan Bai Xiao Formula combined with glucocorticoids and cyclophosphamide for pediatric lupus nephritis: A pilot prospective study
Cao TT, Chen L, Zhen XF, Zhao GJ, Zhang HF, Hu Y

Observational Study

- 11403** Relationship between lipids and sleep apnea: Mendelian randomization analysis
Zhang LP, Zhang XX
- 11411** Efficacy and safety profile of two-dose SARS-CoV-2 vaccines in cancer patients: An observational study in China
Cai SW, Chen JY, Wan R, Pan DJ, Yang WL, Zhou RG

Prospective Study

- 11419** Pressure changes in tapered and cylindrical shaped cuff after extension of head and neck: A randomized controlled trial
Seol G, Jin J, Oh J, Byun SH, Jeon Y

Randomized Controlled Trial

- 11427** Effect of intradermal needle therapy at combined acupoints on patients' gastrointestinal function following surgery for gastrointestinal tumors
Guo M, Wang M, Chen LL, Wei FJ, Li JE, Lu QX, Zhang L, Yang HX

SYSTEMATIC REVIEWS

- 11442** Video-assisted bystander cardiopulmonary resuscitation improves the quality of chest compressions during simulated cardiac arrests: A systemic review and meta-analysis
Pan DF, Li ZJ, Ji XZ, Yang LT, Liang PF

META-ANALYSIS

- 11454** Efficacy of the femoral neck system in femoral neck fracture treatment in adults: A systematic review and meta-analysis
Wu ZF, Luo ZH, Hu LC, Luo YW
- 11466** Prevalence of polymyxin-induced nephrotoxicity and its predictors in critically ill adult patients: A meta-analysis
Wang JL, Xiang BX, Song XL, Que RM, Zuo XC, Xie YL

CASE REPORT

- 11486** Novel compound heterozygous variants in the LHX3 gene caused combined pituitary hormone deficiency: A case report
Lin SZ, Ma QJ, Pang QM, Chen QD, Wang WQ, Li JY, Zhang SL
- 11493** Fatal bleeding due to an aorto-esophageal fistula: A case report and literature review
Ćeranić D, Nikolić S, Lučev J, Slanić A, Bujas T, Ocepek A, Skok P
- 11500** Tolvaptan ameliorated kidney function for one elderly autosomal dominant polycystic kidney disease patient: A case report
Zhou L, Tian Y, Ma L, Li WG
- 11508** Extensive right coronary artery thrombosis in a patient with COVID-19: A case report
Dall'Orto CC, Lopes RPF, Cancela MT, de Sales Padilha C, Pinto Filho GV, da Silva MR
- 11517** Yokoyama procedure for a woman with heavy eye syndrome who underwent multiple recession-resection operations: A case report
Yao Z, Jiang WL, Yang X
- 11523** Rectal cancer combined with abdominal tuberculosis: A case report
Liu PG, Chen XF, Feng PF
- 11529** Malignant obstruction in the ileocecal region treated by self-expandable stent placement under the fluoroscopic guidance: A case report
Wu Y, Li X, Xiong F, Bao WD, Dai YZ, Yue LJ, Liu Y
- 11536** Granulocytic sarcoma with long spinal cord compression: A case report
Shao YD, Wang XH, Sun L, Cui XG
- 11542** Aortic dissection with epileptic seizure: A case report
Zheng B, Huang XQ, Chen Z, Wang J, Gu GF, Luo XJ

- 11549** Multiple bilateral and symmetric C1-2 ganglioneuromas: A case report
Wang S, Ma JX, Zheng L, Sun ST, Xiang LB, Chen Y
- 11555** Acute myocardial infarction due to Kounis syndrome: A case report
Xu GZ, Wang G
- 11561** Surgical excision of a large retroperitoneal lymphangioma: A case report
Park JH, Lee D, Maeng YH, Chang WB
- 11567** Mass-like extragonadal endometriosis associated malignant transformation in the pelvis: A rare case report
Chen P, Deng Y, Wang QQ, Xu HW
- 11574** Gastric ulcer treated using an elastic traction ring combined with clip: A case report
Pang F, Song YJ, Sikong YH, Zhang AJ, Zuo XL, Li RY
- 11579** Novel liver vein deprivation technique that promotes increased residual liver volume (with video): A case report
Wu G, Jiang JP, Cheng DH, Yang C, Liao DX, Liao YB, Lau WY, Zhang Y
- 11585** Linear porokeratosis of the foot with dermoscopic manifestations: A case report
Yang J, Du YQ, Fang XY, Li B, Xi ZQ, Feng WL
- 11590** Primary hepatic angiosarcoma: A case report
Wang J, Sun LT
- 11597** Hemorrhagic shock due to ruptured lower limb vascular malformation in a neurofibromatosis type 1 patient: A case report
Shen LP, Jin G, Zhu RT, Jiang HT
- 11607** Gastric linitis plastica with autoimmune pancreatitis diagnosed by an endoscopic ultrasonography-guided fine-needle biopsy: A case report
Sato R, Matsumoto K, Kanzaki H, Matsumi A, Miyamoto K, Morimoto K, Terasawa H, Fujii Y, Yamazaki T, Uchida D, Tsutsumi K, Horiguchi S, Kato H
- 11617** Favorable response of primary pulmonary lymphoepithelioma-like carcinoma to sintilimab combined with chemotherapy: A case report
Zeng SY, Yuan J, Lv M
- 11625** Benign paroxysmal positional vertigo with congenital nystagmus: A case report
Li GF, Wang YT, Lu XG, Liu M, Liu CB, Wang CH
- 11630** Secondary craniofacial necrotizing fasciitis from a distant septic emboli: A case report
Lee DW, Kwak SH, Choi HJ
- 11638** Pancreatic paraganglioma with multiple lymph node metastases found by spectral computed tomography: A case report and review of the literature
Li T, Yi RQ, Xie G, Wang DN, Ren YT, Li K

- 11646** Apnea caused by retrobulbar anesthesia: A case report
Wang YL, Lan GR, Zou X, Wang EQ, Dai RP, Chen YX
- 11652** Unexplained septic shock after colonoscopy with polyethylene glycol preparation in a young adult: A case report
Song JJ, Wu CJ, Dong YY, Ma C, Gu Q
- 11658** Metachronous isolated penile metastasis from sigmoid colon adenocarcinoma: A case report
Yin GL, Zhu JB, Fu CL, Ding RL, Zhang JM, Lin Q

ABOUT COVER

Editorial Board Member of *World Journal of Clinical Cases*, Muhammad Hamdan Gul, MD, Assistant Professor, Department of Internal Medicine, University of Kentucky, Chicago, IL 60657, United States.
hamdan3802@hotmail.com

AIMS AND SCOPE

The primary aim of *World Journal of Clinical Cases* (*WJCC*, *World J Clin Cases*) is to provide scholars and readers from various fields of clinical medicine with a platform to publish high-quality clinical research articles and communicate their research findings online.

WJCC mainly publishes articles reporting research results and findings obtained in the field of clinical medicine and covering a wide range of topics, including case control studies, retrospective cohort studies, retrospective studies, clinical trials studies, observational studies, prospective studies, randomized controlled trials, randomized clinical trials, systematic reviews, meta-analysis, and case reports.

INDEXING/ABSTRACTING

The *WJCC* is now abstracted and indexed in Science Citation Index Expanded (SCIE, also known as SciSearch®), Journal Citation Reports/Science Edition, Current Contents®/Clinical Medicine, PubMed, PubMed Central, Scopus, Reference Citation Analysis, China National Knowledge Infrastructure, China Science and Technology Journal Database, and Superstar Journals Database. The 2022 Edition of Journal Citation Reports® cites the 2021 impact factor (IF) for *WJCC* as 1.534; IF without journal self cites: 1.491; 5-year IF: 1.599; Journal Citation Indicator: 0.28; Ranking: 135 among 172 journals in medicine, general and internal; and Quartile category: Q4. The *WJCC*'s CiteScore for 2021 is 1.2 and Scopus CiteScore rank 2021: General Medicine is 443/826.

RESPONSIBLE EDITORS FOR THIS ISSUE

Production Editor: *Xu Guo*; Production Department Director: *Xiang Li*; Editorial Office Director: *Jin-Lei Wang*.

NAME OF JOURNAL

World Journal of Clinical Cases

ISSN

ISSN 2307-8960 (online)

LAUNCH DATE

April 16, 2013

FREQUENCY

Thrice Monthly

EDITORS-IN-CHIEF

Bao-Gan Peng, Jerzy Tadeusz Chudek, George Kontogeorgos, Maurizio Serati, Ja Hyeon Ku

EDITORIAL BOARD MEMBERS

<https://www.wjgnet.com/2307-8960/editorialboard.htm>

PUBLICATION DATE

November 6, 2022

COPYRIGHT

© 2022 Baishideng Publishing Group Inc

INSTRUCTIONS TO AUTHORS

<https://www.wjgnet.com/bpg/gerinfo/204>

GUIDELINES FOR ETHICS DOCUMENTS

<https://www.wjgnet.com/bpg/GerInfo/287>

GUIDELINES FOR NON-NATIVE SPEAKERS OF ENGLISH

<https://www.wjgnet.com/bpg/gerinfo/240>

PUBLICATION ETHICS

<https://www.wjgnet.com/bpg/GerInfo/288>

PUBLICATION MISCONDUCT

<https://www.wjgnet.com/bpg/gerinfo/208>

ARTICLE PROCESSING CHARGE

<https://www.wjgnet.com/bpg/gerinfo/242>

STEPS FOR SUBMITTING MANUSCRIPTS

<https://www.wjgnet.com/bpg/GerInfo/239>

ONLINE SUBMISSION

<https://www.f6publishing.com>

Gastric ulcer treated using an elastic traction ring combined with clip: A case report

Fei Pang, Yan-Jun Song, Yin-He Sikong, Ai-Jun Zhang, Xiu-Li Zuo, Ru-Yuan Li

Specialty type: Gastroenterology and hepatology

Provenance and peer review:

Unsolicited article; Externally peer reviewed.

Peer-review model: Single blind

Peer-review report's scientific quality classification

Grade A (Excellent): 0

Grade B (Very good): B

Grade C (Good): C

Grade D (Fair): 0

Grade E (Poor): 0

P-Reviewer: Piltcher-da-Silva R, Brazil; Yoshikawa T, Japan

Received: June 21, 2022

Peer-review started: June 21, 2022

First decision: August 1, 2022

Revised: August 28, 2022

Accepted: September 23, 2022

Article in press: September 23, 2022

Published online: November 6, 2022



Fei Pang, Yin-He Sikong, Ai-Jun Zhang, Ru-Yuan Li, Department of Gastroenterology, Qilu Hospital (Qingdao), Cheeloo College of Medicine, Shangdong University, Qingdao 266035, Shandong Province, China

Yan-Jun Song, Department of Hematology, Qilu Hospital (Qingdao), Cheeloo College of Medicine, Shangdong University, Qingdao 266035, Shandong Province, China

Xiu-Li Zuo, Department of Gastroenterology, Qilu Hospital, Cheeloo College of Medicine, Shangdong University, Jinan 250012, Shandong Province, China

Corresponding author: Ru-Yuan Li, MM, Attending Doctor, Department of Gastroenterology, Qilu Hospital (Qingdao), Cheeloo College of Medicine, Shangdong University, No. 758 Hefei Road, Qingdao 266035, Shandong Province, China. liruyuan163@163.com

Abstract

BACKGROUND

There is a high annual incidence of acute, nonvariceal upper gastrointestinal bleeding in Chinese adults. Early endoscopic intervention can reduce rates of rebleeding, surgery, and mortality. The metal clip is the most common method for establishing homeostasis; however, it possesses several limitations. In patients with bleeding secondary to large gastric ulcers, the clip will often fail to stop the bleeding. This article highlights the use of an elastic traction ring as a novel hemostatic method for patients with upper gastrointestinal bleeding.

CASE SUMMARY

An elderly male presented to the emergency room with complaints of hematemesis and melena. Endoscopic examination revealed an ulcer (Forrest IIa) in the lesser curvature of the gastric antrum. Six tissue clips and one elastic traction ring were inserted into the stomach cavity to suture the ulcer. The patient recovered quickly without postoperative gastrointestinal bleeding. Two months later, the patient's ulcer was significantly healed.

CONCLUSION

To our best knowledge, this is the first report to demonstrate the safety and efficacy of elastic traction rings for upper gastrointestinal bleeding. Elastic traction rings should be considered a routine therapeutic modality for patients with upper gastrointestinal bleeds.

Key Words: Gastric ulcer; Elastic traction ring; Acute nonvariceal upper gastrointestinal

bleeding; Endoscopic hemostasia; Tissue clips; Case report

©The Author(s) 2022. Published by Baishideng Publishing Group Inc. All rights reserved.

Core Tip: Acute, nonvariceal, upper gastrointestinal bleeds are common medical emergencies. Gastric ulcers often cause this condition. Early endoscopic intervention can reduce rates of rebleeding, surgery, and mortality. Presently, various methods are available for establishing endoscopic hemostasis. Metal clips are a popular method; however, they possess specific limitations. Elastic traction rings are widely used during endoscopic submucosal dissection procedures. We were the first to apply elastic traction rings for ulcer suturing for hemostasis with excellent results. We are presently evaluating the effectiveness and limitations of this hemostatic method.

Citation: Pang F, Song YJ, Sikong YH, Zhang AJ, Zuo XL, Li RY. Gastric ulcer treated using an elastic traction ring combined with clip: A case report. *World J Clin Cases* 2022; 10(31): 11574-11578

URL: <https://www.wjgnet.com/2307-8960/full/v10/i31/11574.htm>

DOI: <https://dx.doi.org/10.12998/wjcc.v10.i31.11574>

INTRODUCTION

The annual incidence of acute upper gastrointestinal bleeding in Chinese adults is high; 80%-90% are acute nonvariceal upper gastrointestinal bleeding. Early endoscopic intervention can reduce rates of rebleeding, surgery, and mortality. Various methods of establishing hemostasis using endoscopic submucosal dissection (ESD) exist. The metal clip is the most common method for establishing homeostasis; however, it possesses several limitations for larger gastric ulcers.

We invented an elastic traction ring and used it during ESD surgery to assist with wound resection and suturing.

CASE PRESENTATION

Chief complaints

A 66-year-old Chinese male presented to the emergency department with hematemesis and melena.

History of present illness

The patient's symptoms started 1 d before presentation.

History of past illness

His past medical history was significant for gout with intermittent gouty arthritis (> 10 years, treated with oral nonsteroidal anti-inflammatory drugs) and poorly-controlled hypertension (> 5 years, treated with oral aspirin and Apocynum).

Personal and family history

The patient denied any family history of malignant tumors.

Physical examination

A physical examination revealed: a body temperature of 36.8°C; blood pressure of 118/48 mmHg; heart rate of 76 beats per min; and respiratory rate of 19 breaths per min. His skin, mucus membranes, and lips were pale. His abdomen was soft and without tenderness. He exhibited normal rebound in response to pain and bowel sounds. There were no abnormal masses noted.

Laboratory examinations

All serum tumor marker levels were normal. His hemoglobin (Hgb) was 67 g/L, and blood urea nitrogen (BUN) was 14.27 mmol/L. All other laboratory results were unremarkable.

Imaging examinations

The patient's abdominal computed tomography scan was normal.

FINAL DIAGNOSIS

Considering the patient's medical history, he was finally diagnosed with an upper gastrointestinal ulcer with bleeding.

TREATMENT

The patient was diagnosed with an upper gastrointestinal bleed. To determine the location and cause of the bleeding, the patient underwent gastroscopy after providing written informed consent. Endoscopy revealed one 1.5 cm × 2.0 cm ulcer (Forrest IIa) in the lesser curvature of the gastric antrum with a bare leak of blood vessels noted in the base. Using only a tissue clip, we were unable to completely occlude the ulcer. To achieve hemostasis, we adopted a novel approach, as follows.

We inserted a tissue clip with an elastic traction ring through the gastroscopic biopsy channel and into the stomach cavity where it was fixed to the normal mucosa surrounding the ulcer. We used a second tissue clip to secure the large circle of the elastic traction ring and provide sufficient tension. The ring was then fixed to the normal mucosa on the other side of the ulcer. The elastic traction ring's tensile forces successfully narrowed the ulcer's surface. The tissue clips were used again to suture the ulcer completely (Figure 1). This treatment was well tolerated and the patient did not experience any postoperative discomfort.

OUTCOME AND FOLLOW-UP

The patient was able to tolerate a thin liquid diet 1 d after surgery and was discharged 3 d after surgery. He experienced no postoperative bleeding and his Hgb increased to 88 g/L and his BUN normalized. His second postoperative defecation after endoscopy was yellow and soft. After 6 wk of regular medication, he underwent a repeat gastroscopy which revealed a healed ulcer (Figure 2).

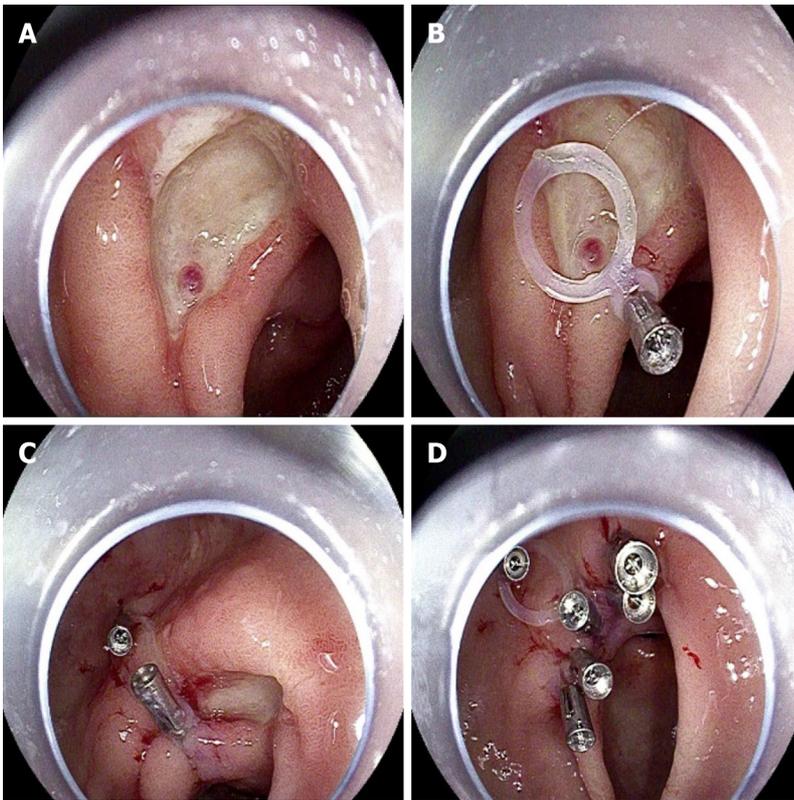
DISCUSSION

The current annual incidence of acute upper gastrointestinal bleeding in Chinese adults is 100–180/100000[1]; of these, 80%-90% are acute nonvariceal upper gastrointestinal bleeds[2]. The Forrest classification includes four severity levels (Ia, Ib, IIa, and IIc) that correspond to rebleeding rates of 90%, 50%, 25%-30%, and 10%-20%, respectively[3]. Patients at risk for bleeding ulcers require timely endoscopic intervention[4]. Early endoscopy can reduce rates of rebleeding, surgery, and mortality[1,5,6]. After ESD, rebleeding was observed to decrease from 18.4% to 10.6%, emergency surgery decreased from 11.3% to 7.6%, and mortality decreased from 5.1% to 2.6%[7]. At present, endoscopic hemostatic measures mainly include topical drug application, local drug injection, laser, microwave, argon plasma coagulation (APC), thermal hemostatic clamping, hemostatic clamping, nylon rope combined with hemostatic clamping, and the over the scope clip hemostatic clip[8]. The metal clip is the most common method for establishing homeostasis; however, it possesses several limitations. Meanwhile, other methods are expensive or complicated. While metal clips are good for addressing routine bleeding ulcers, they can be ineffective for large, deep, or unusually situated lesions.

ESD surgery uses traction technology to maximize the operator's surgical field of view while enhancing safety and clinical efficacy[9]. Various kinds of traction aids exist; however, the novel elastic traction ring is becoming more popular[10,11]. Because these rings are new, their application and function require additional study. Therefore, there is currently a lack of relevant data on its use and efficacy.

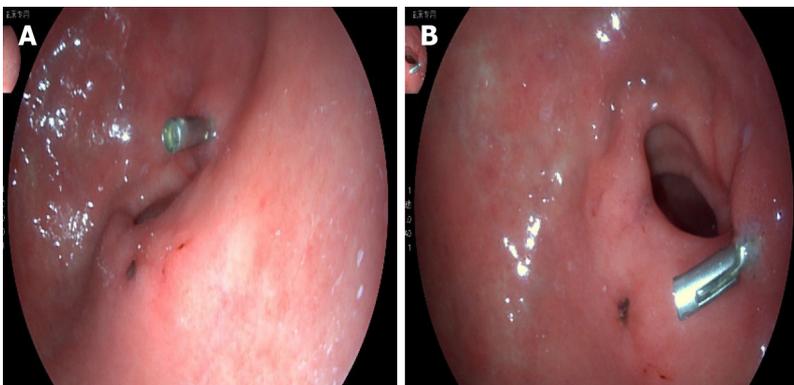
We have used the elastic traction ring for gastroscopic suturing of upper gastrointestinal ulcers. To our best knowledge, this is the first report of successful hemostasis using an elastic traction ring to rapidly shrink the ulcer surface during a very simple operation. The ulcer can then be occluded using a metal clip. This allows for complete occlusion during a single endoscopy. Moreover, the postclipping rebleeding rate is lower than rates of rebleeding following topical treatments, APC, and heated hemostatic forceps.

Our traction ring features a double ring and is approximately 1 cm relaxed and approximately 1.5 cm when in a tensile state. As described here, we easily use the elastic traction ring to suture a 2-cm diameter gastric ulcer. We are continuing to try and determine the maximum ulcer diameter where our ring could be successfully deployed.



DOI: 10.12998/wjcc.v10.i31.11574 Copyright ©The Author(s) 2022.

Figure 1 Gastric ulcer treated by an elastic traction ring in combination with a clip. A: One 1.5 cm × 2.0 cm ulcer in the lesser curvature of the gastric antrum with a bare leak of blood vessels in the base; B: A tissue clip with an elastic traction ring fixed to the normal mucosa surrounding the ulcer; C: The second tissue clip clips the large circle of the elastic traction ring and then is fixed to the normal mucosa on the other side of the ulcer; D: The tissue clips are used to suture the ulcer completely.



DOI: 10.12998/wjcc.v10.i31.11574 Copyright ©The Author(s) 2022.

Figure 2 Pathological changes of atrophic gastritis after two months, the ulcer was healed. A and B: Ulcer was healed.

CONCLUSION

In conclusion, this is the first report of a new technique for establishing homeostasis under endoscopy. Importantly, our novel elastic traction ring appears both safe and effective for use with upper gastrointestinal ulcers. We recommend that surgeons consider the elastic traction ring as a potential therapeutic modality for use with patients who present with bleeding upper gastrointestinal ulcers. Our method can also be used for suturing after ESD. We believe that our method d further study and discussion.

FOOTNOTES

Author contributions: Pang F wrote this article; Sikong YH and Song YJ managed this patient's hospitalization; Zuo XL and Zhang AJ made the diagnosis and treatment plan; Li RY performed the operation of this patient.

Informed consent statement: Informed written consent was obtained from the patient for publication of this report and any accompanying images.

Conflict-of-interest statement: All authors declare that they have no conflict of interest to disclose.

CARE Checklist (2016) statement: The authors have read the CARE Checklist (2016), and the manuscript was prepared and revised according to the CARE Checklist (2016).

Open-Access: This article is an open-access article that was selected by an in-house editor and fully peer-reviewed by external reviewers. It is distributed in accordance with the Creative Commons Attribution NonCommercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited and the use is non-commercial. See: <https://creativecommons.org/licenses/by-nc/4.0/>

Country/Territory of origin: China

ORCID number: Fei Pang 0000-0003-3494-2381; Yin-He Sikong 0000-0003-0476-7148; Xiu-Li Zuo 0000-0002-2942-1744; Ru-yuan Li 0000-0003-0336-3221.

S-Editor: Liu JH

L-Editor: A

P-Editor: Liu JH

REFERENCES

- Chinese Medical Association Emergency Physician Branch. Expert consensus on emergency diagnosis and treatment process of acute upper gastrointestinal hemorrhage. *Zhongguo Jijiu Yixue* 2015; **10**: 856-873
- Lau JY, Sung J, Hill C, Henderson C, Howden CW, Metz DC. Systematic review of the epidemiology of complicated peptic ulcer disease: incidence, recurrence, risk factors and mortality. *Digestion* 2011; **84**: 102-113 [PMID: 21494041 DOI: 10.1159/000323958]
- Chinese Journal of Internal Medicine; National Medical Journal of China; Chinese Journal of Digestion; Chinese Journal of Digestive Endoscopy; Chinese Digestive Endoscopist Association. [Guidelines for the diagnosis and treatment of acute non-variceal upper gastrointestinal bleeding (2018, Hangzhou)]. *Zhonghua Nei Ke Za Zhi* 2019; **58**: 173-180 [PMID: 30803174 DOI: 10.3760/cma.j.issn.0578-1426.2019.03.005]
- Camus M, Jensen DM, Kovacs TO, Jensen ME, Markovic D, Gornbein J. Independent risk factors of 30-day outcomes in 1264 patients with peptic ulcer bleeding in the USA: large ulcers do worse. *Aliment Pharmacol Ther* 2016; **43**: 1080-1089 [PMID: 27000531 DOI: 10.1111/apt.13591]
- Sung JJ, Chan FK, Chen M, Ching JY, Ho KY, Kachintorn U, Kim N, Lau JY, Menon J, Rani AA, Reddy N, Sollano J, Sugano K, Tsoi KK, Wu CY, Yeomans N, Vakil N, Goh KL; Asia-Pacific Working Group. Asia-Pacific Working Group consensus on non-variceal upper gastrointestinal bleeding. *Gut* 2011; **60**: 1170-1177 [PMID: 21471571 DOI: 10.1136/gut.2010.230292]
- Laine L, Jensen DM. Management of patients with ulcer bleeding. *Am J Gastroenterol* 2012; **107**: 345-60; quiz 361 [PMID: 22310222 DOI: 10.1038/ajg.2011.480]
- Calvet X, Vergara M, Brullet E, Gisbert JP, Campo R. Addition of a second endoscopic treatment following epinephrine injection improves outcome in high-risk bleeding ulcers. *Gastroenterology* 2004; **126**: 441-450 [PMID: 14762781 DOI: 10.1053/j.gastro.2003.11.006]
- Gralnek IM, Dumonceau JM, Kuipers EJ, Lanas A, Sanders DS, Kurien M, Rotondano G, Hucl T, Dinis-Ribeiro M, Marmo R, Racz I, Arezzo A, Hoffmann RT, Lesur G, de Franchis R, Aabakken L, Veitch A, Radaelli F, Salgueiro P, Cardoso R, Maia L, Zullo A, Cipolletta L, Hassan C. Diagnosis and management of nonvariceal upper gastrointestinal hemorrhage: European Society of Gastrointestinal Endoscopy (ESGE) Guideline. *Endoscopy* 2015; **47**: a1-46 [PMID: 26417980 DOI: 10.1055/s-0034-1393172]
- Isomoto H, Shikuwa S, Yamaguchi N, Fukuda E, Ikeda K, Nishiyama H, Ohnita K, Mizuta Y, Shiozawa J, Kohno S. Endoscopic submucosal dissection for early gastric cancer: a large-scale feasibility study. *Gut* 2009; **58**: 331-336 [PMID: 19001058 DOI: 10.1136/gut.2008.165381]
- Liu X, Yu X, Wang Y, Yu J, Liu X, Liu Z, Hao J. Effectiveness of a novel traction device in endoscopic submucosal dissection for colorectal lesions. *Surg Endosc* 2022 [PMID: 35941305 DOI: 10.1007/s00464-022-09228-4]
- Zhang A, Song Y, Cui X, Wang B, Li R. Application of in vivo traction-assisted resection of proximal colon lesions: a case series (with video). *Surg Endosc* 2022 [PMID: 35511341 DOI: 10.1007/s00464-022-09266-y]



Published by **Baishideng Publishing Group Inc**
7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
Telephone: +1-925-3991568
E-mail: bpgoffice@wjgnet.com
Help Desk: <https://www.f6publishing.com/helpdesk>
<https://www.wjgnet.com>

