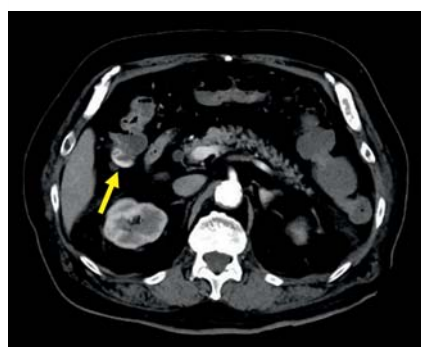
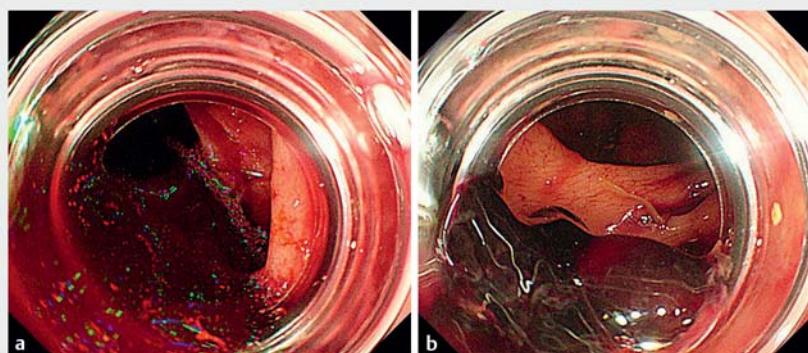


Usefulness of gel immersion endoscopy to identify a colonic diverticulum with active bleeding

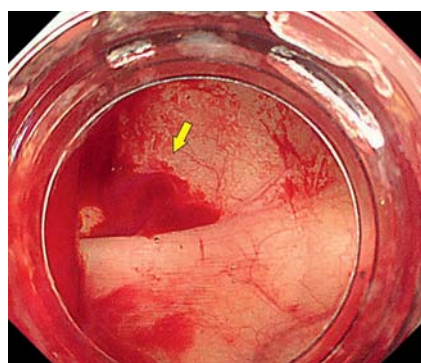
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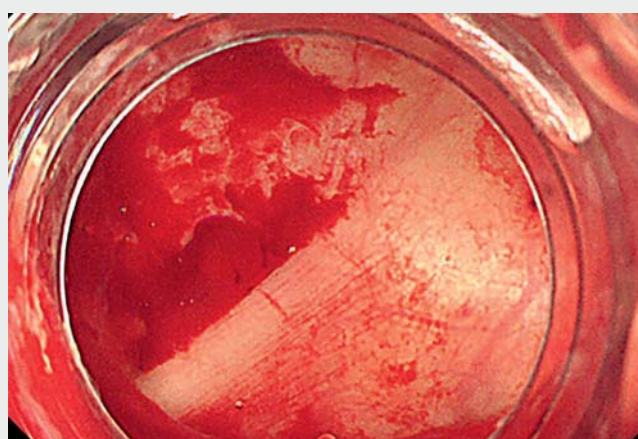
► **Fig. 1** Contrast-enhanced computed tomography revealed extravasation in the ascending colon (arrow).



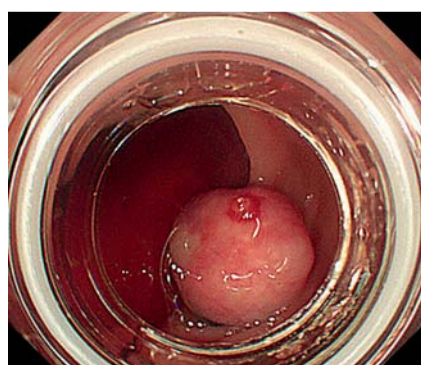
► **Fig. 2** Fresh blood and clotting were observed in the ascending colon.



► **Fig. 3** Gel immersion endoscopy showed a diverticulum with pulsatile bleeding (arrow).



► **Video 1** Gel immersion endoscopy for colonic diverticular bleeding with active bleeding.



► **Fig. 4** A vessel was visualized on the ligated diverticulum.

Management of colonic diverticular bleeding is clinically important because severe cases require transarterial embolization or surgical intervention; colonic diverticular bleeding can cause death in elderly patients with multiple comorbidities [1]. Colonoscopy enables the diagnosis and treatment of the bleeding site; however, identifying the diverticulum with active bleeding is challenging. Gel immersion endoscopy has been reported to be useful for securing the visual field

during endoscopy for gastrointestinal bleeding [2, 3]. We report a case in which gel immersion endoscopy was effective in allowing the colonic diverticulum with active bleeding to be identified.

An 87-year-old man taking aspirin and apixaban for ischemic heart disease presented to our hospital with massive hematochezia from that morning. On admission, his hemoglobin level was 8.0 g/dL and he exhibited vital signs of shock. Contrast-enhanced computed tomog-

raphy revealed extravasation in the ascending colon (► **Fig. 1**). We performed emergency colonoscopy with blood transfusion. Fresh blood and clotting were observed in the ascending colon (► **Fig. 2**). However, we were unable to identify the bleeding point because of active bleeding and poor visual field. After injecting Viscoclear gel (Otsuka Pharmaceutical Factory, Tokushima, Japan) [4], the visual field improved and a diverticulum with pulsatile bleeding was identified (► **Fig. 3**, ► **Video 1**). An endo-clip was placed as a marker close to this diverticulum, and endoscopic band ligation was then carried out (► **Fig. 4**). Bleeding did not recur after the treatment.

In summary, we found gel immersion endoscopy to be useful for identifying a colonic diverticulum with active bleeding.

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Competing interests

The authors declare that they have no conflict of interest.

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