



Colorectal Web Meeting

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1-Year-Old Female Patient Previously Asymptomatic



- Respiratory tract infection (1 week)
- Acute Gastroenteritis (onset 3 days prior to admission)
- Leukopenia (ANC – Absolute neutrophil count of 400)
- C reactive protein 14.1 mg/dL
- Procalcitonin 6.12 ng/ml

Consulted because of “perianal dermatitis”


Clinical appearance....



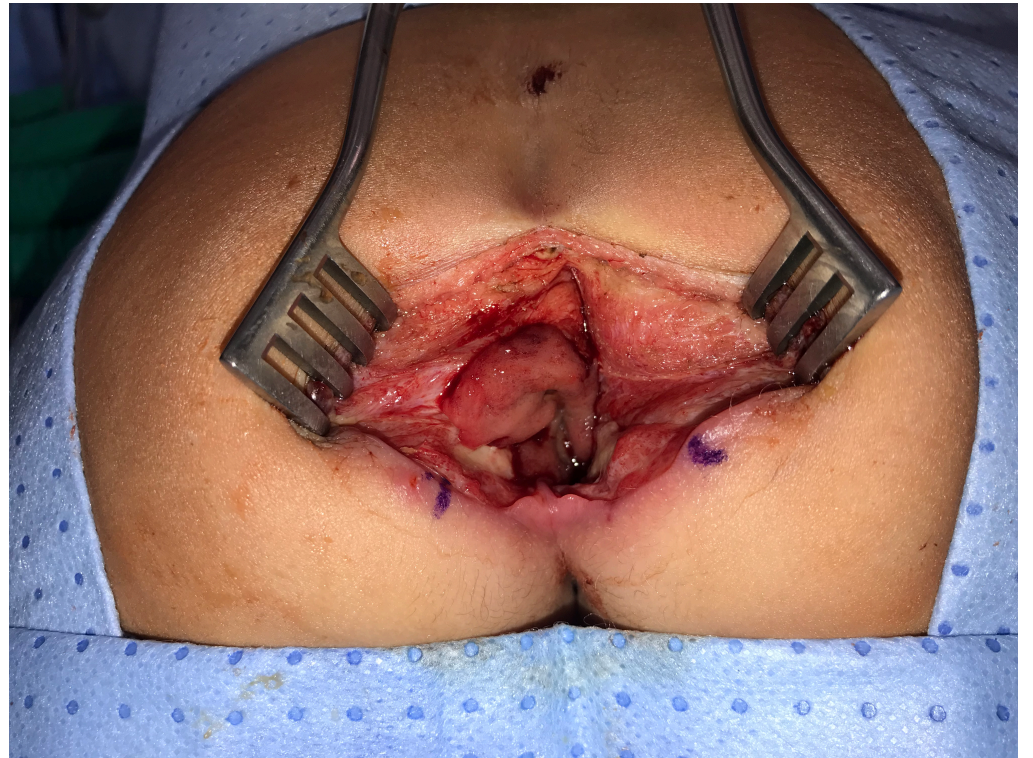
What surgical treatment would you perform?

1. Ileostomy
2. Transverse colostomy
3. Descendent colostomy
4. Debridement
5. I do not know

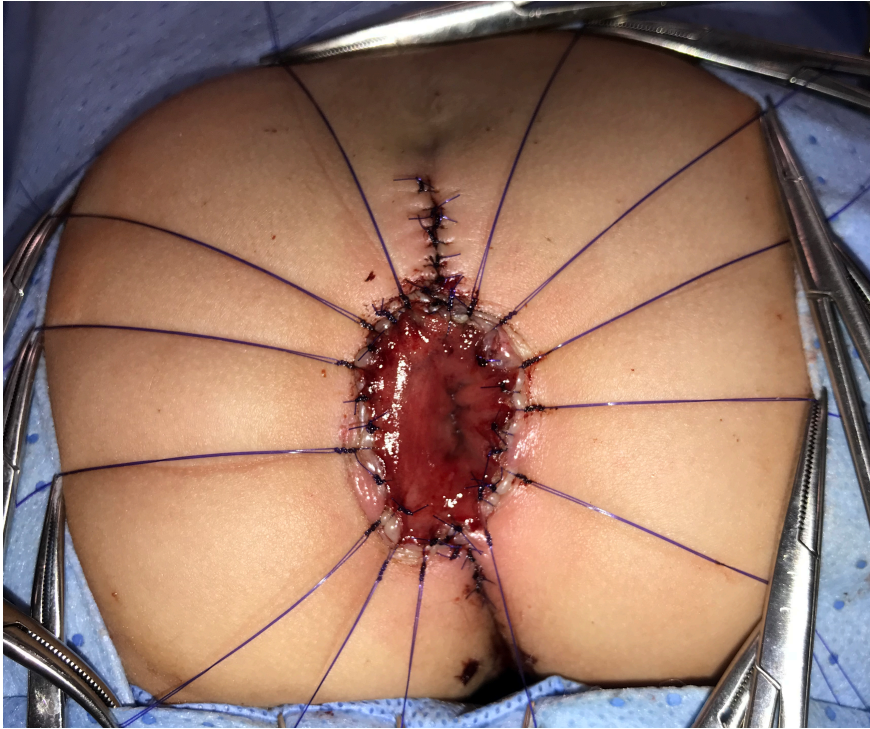




After 5 days of
treatment with
topical zinc
hyaluronate








- Granulocyte Stimulating Factor was given for 10 days after the restorative operation
- Anal dilations were initiated 2 weeks after surgery
- Colostomy closure will be planned after a definitive diagnosis

Discussion

- **Primary anorectal sepsis**

- Invasion of the soft tissues in the peri-anal area
- Most commonly associated with Crohn's disease and immunocompromise

- Secondary anorectal sepsis results from dehiscence of a pelvic anastomosis after restorative proctocolectomy, PSARP, and low-rectal resection



Is it possible to perform an upfront rescue operation?



Thank you

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