

A neonate with bowel distension...

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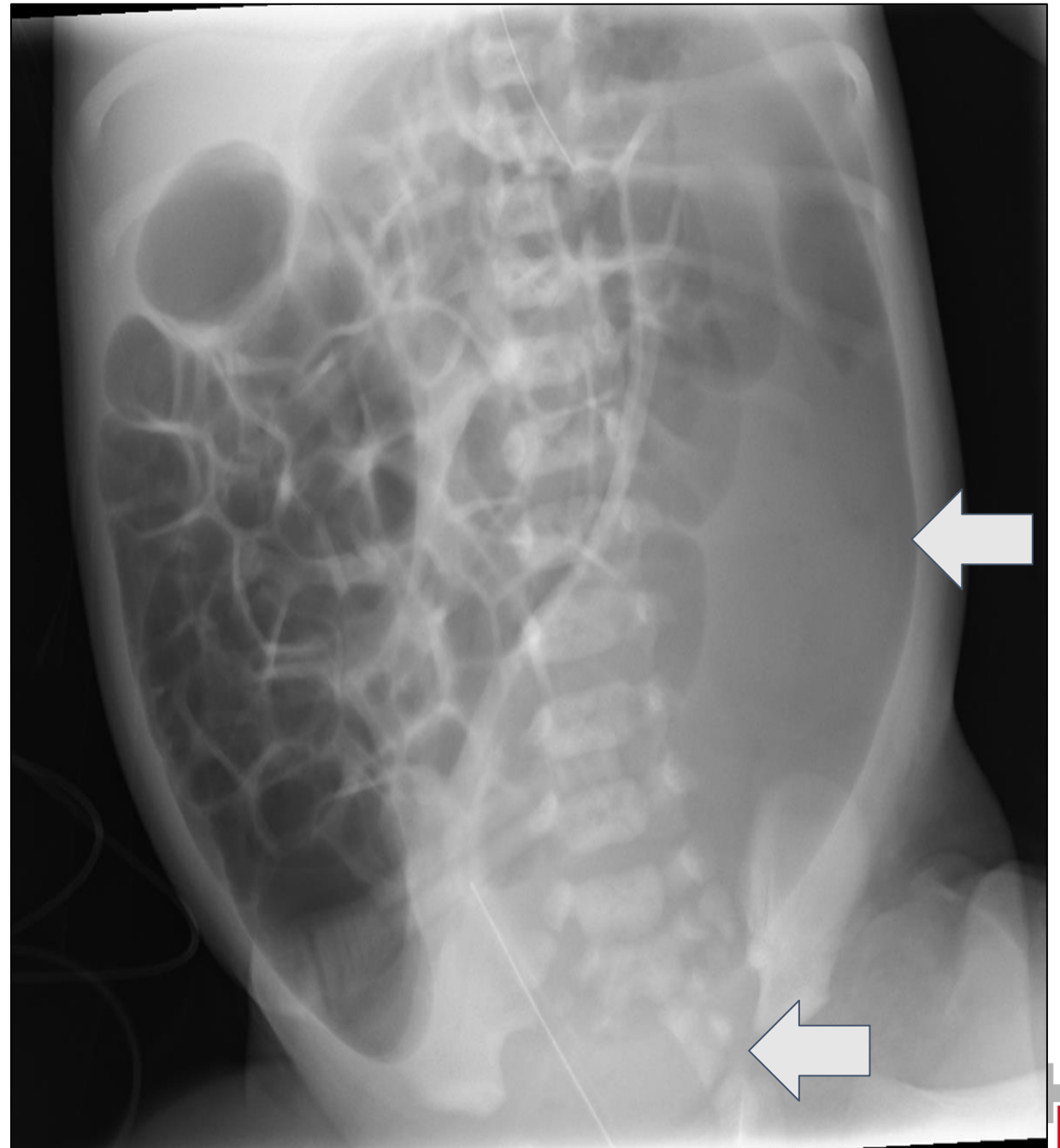
Case

- **Male** newborn
- **40** weeks (3170g)
- **Normal** prenatal care
- **34h**→ Derived by **suspicion** of bowel **occlusion**:
 - Vomiting and abdominal distension after feeding
 - No meconiorrhexis or gas expulsion



Rx

- **Large** bowel distention
- **Sacral** anomaly
- **Rectal stimulation**
- **Saline enemas**
- **Partially** effective...



Case

- Exploration:
 - Normal external genitalia
 - Normal external anal disposition
 - Rectal: **No pass little** finger
 - Hegar dilator No. 3



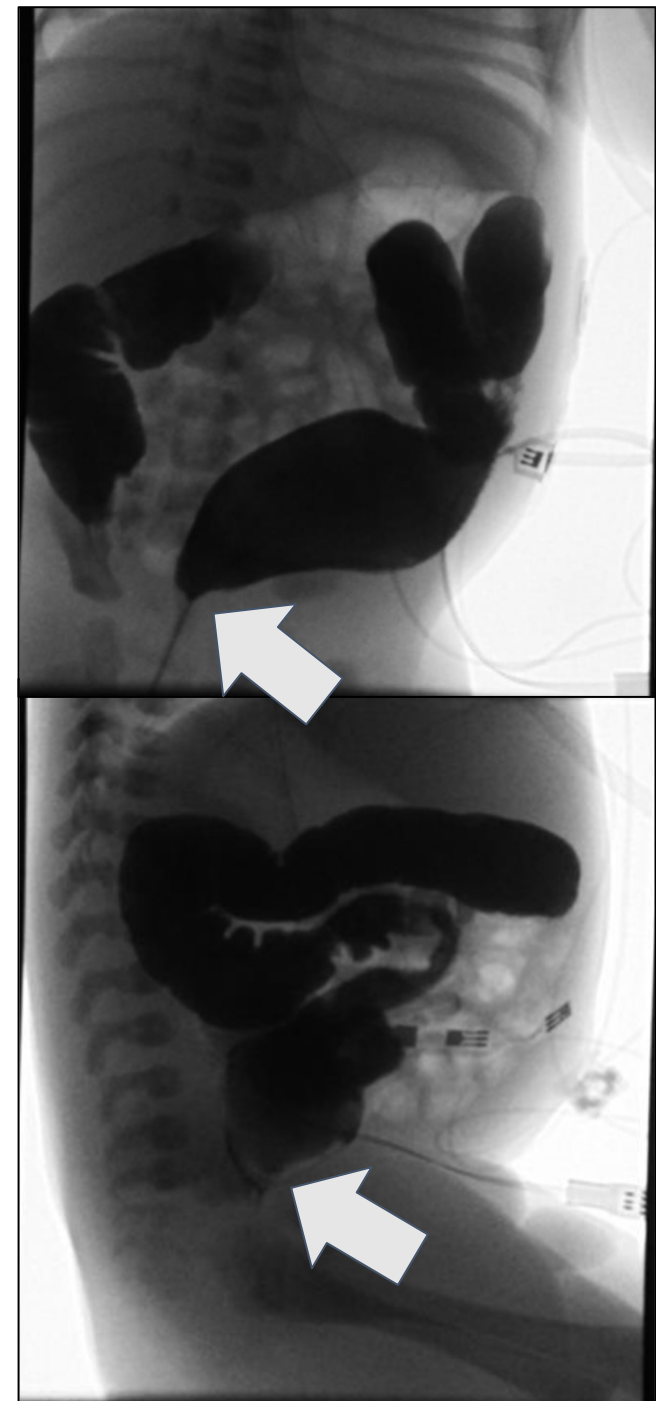
Case

- Differential diagnosis?
 - A. Hirschsprung disease
 - B. Meconial plug
 - C. Currarino syndrome
 - D. Anorectal malformation



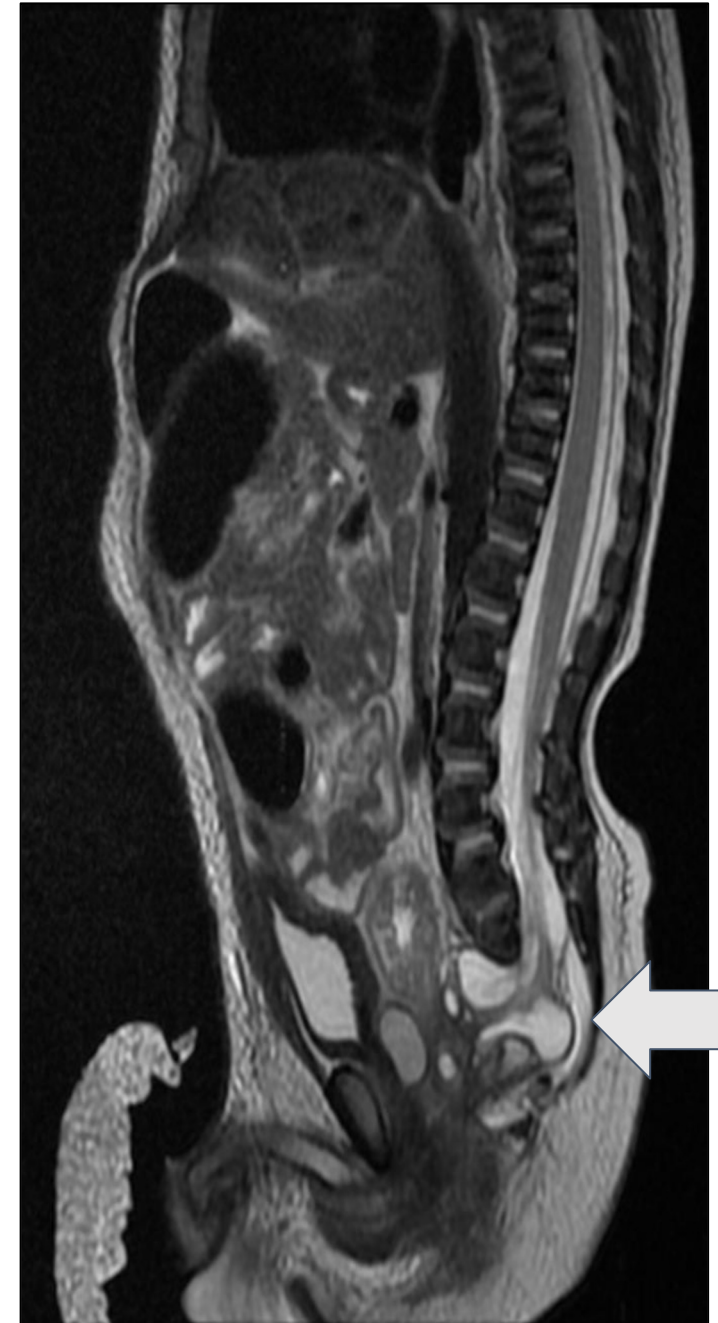
Opaque enema (3 days)

- **No** visualization of the recto-anal area
- **Sharp** distal rectus (beak)
- **Dilatation** of the sigma
- Suggestive of recto-anal **stenosis**
- Adequate oral intake
- **Nursing:** Gas and stool properly



RMI

- Hemisacral right **agenesis**
- **Tethered** spinal cord
- Anterior **myelomeningocele** (22x14x15mm)
- Absence of the left branch of puborectalis
- Dx: **Currarino syndrome**



Case

12 days:

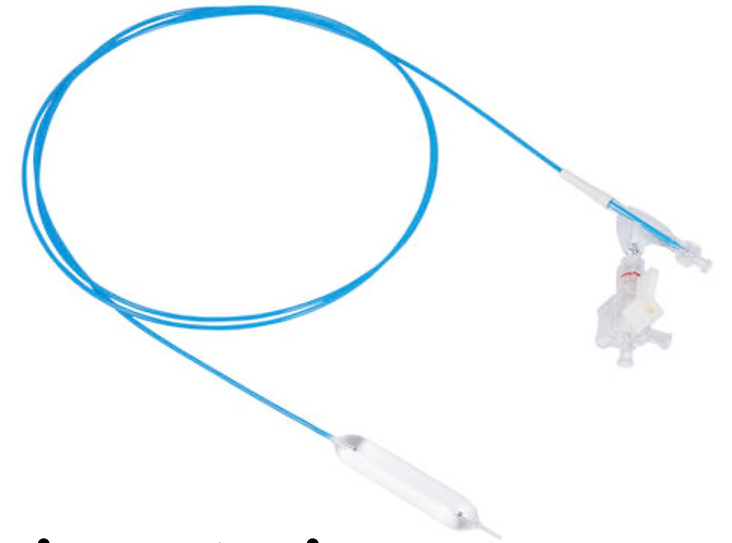
- Calibration, stimulation and dilatation (OR):

- Anal **estenosis**: **2cm** length

- Stimulation: Normal lat.-post. Slightly **weaker in anterior** area

- Calibration: Hegar No. **4**

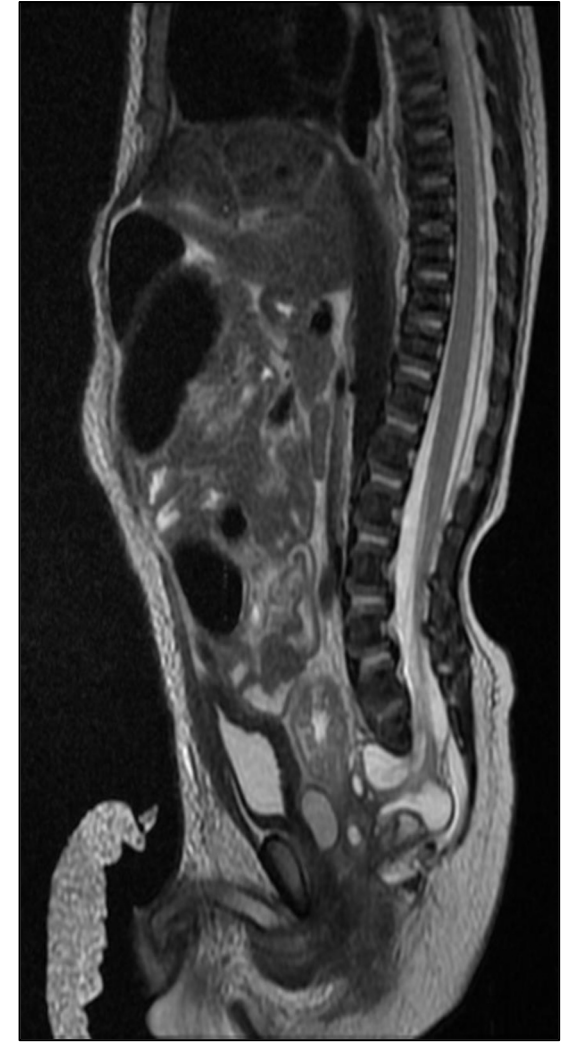
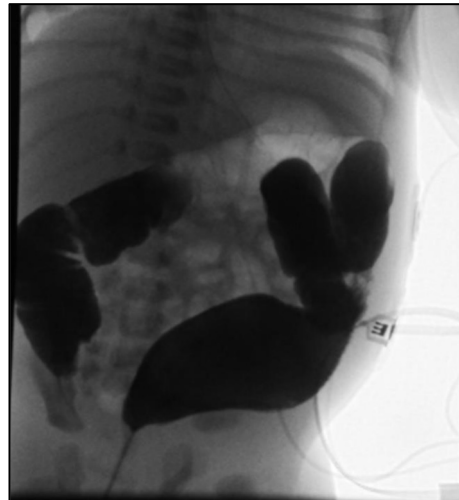
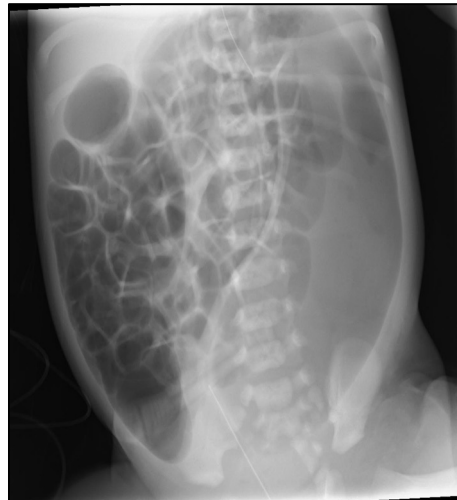
- Pneumatic dilatation **8mm** → Hegar No. **8**



*Perianal cellulitis

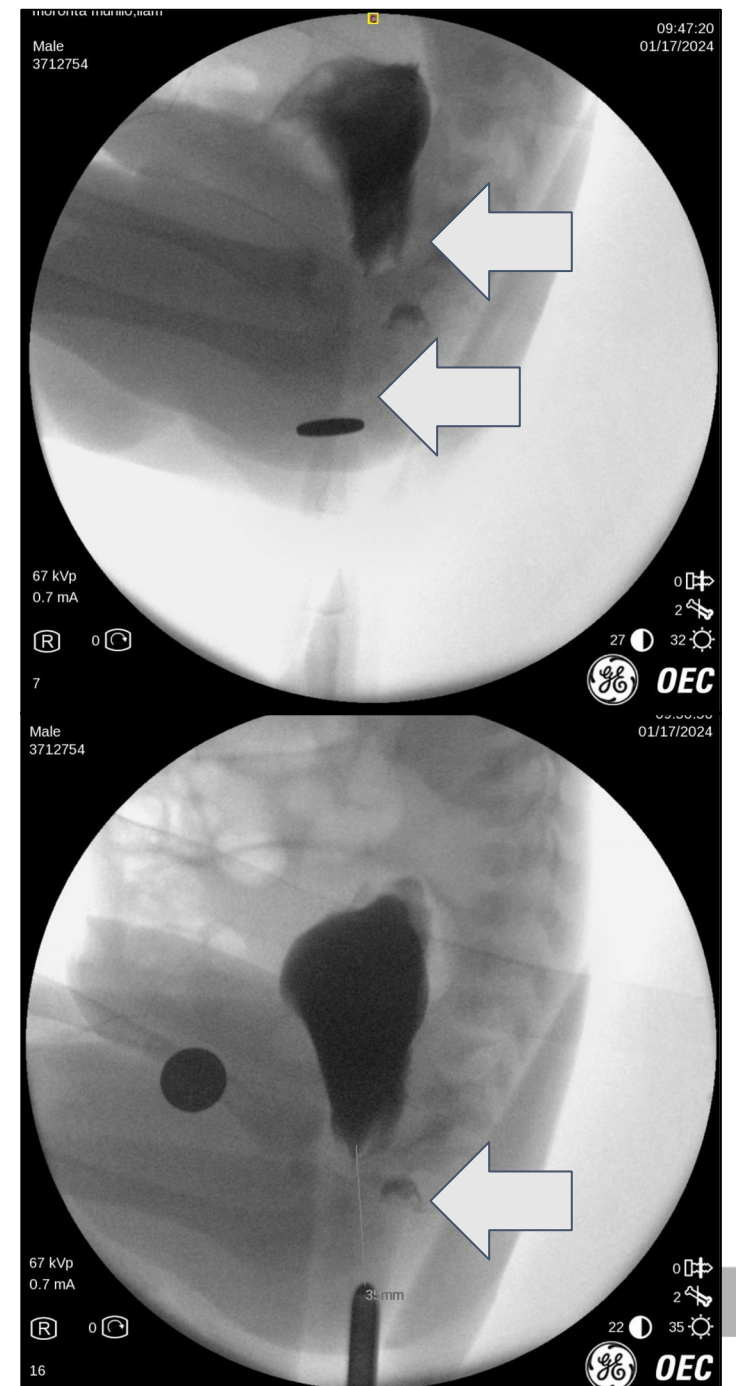
Case

- Diagnosis of **currarino** syndrome:
 - Rectal **irrigations** 2-3 times/day
 - Hegar dilators 1 time/day No. **6** → **7**
 - **Good** evolution. Discharge: **1 month** of age



Case

- 40 days, OR exploration:
 - Hegar calibration: No. 8
 - Opaque enema:
 - ❖ Funnel-shaped distal area
 - ❖ Length of recto-anal stenosis: 15mm

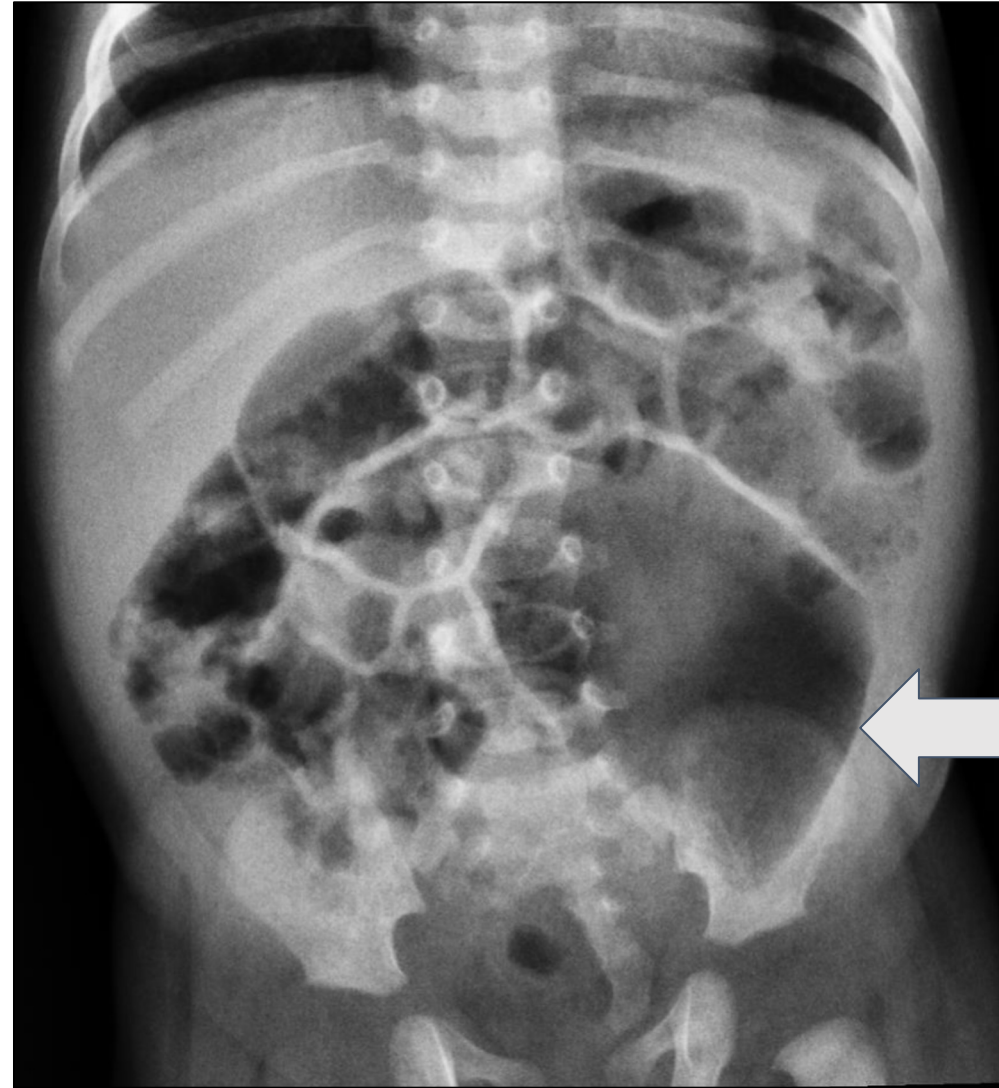


Case

Nursing (3/day)

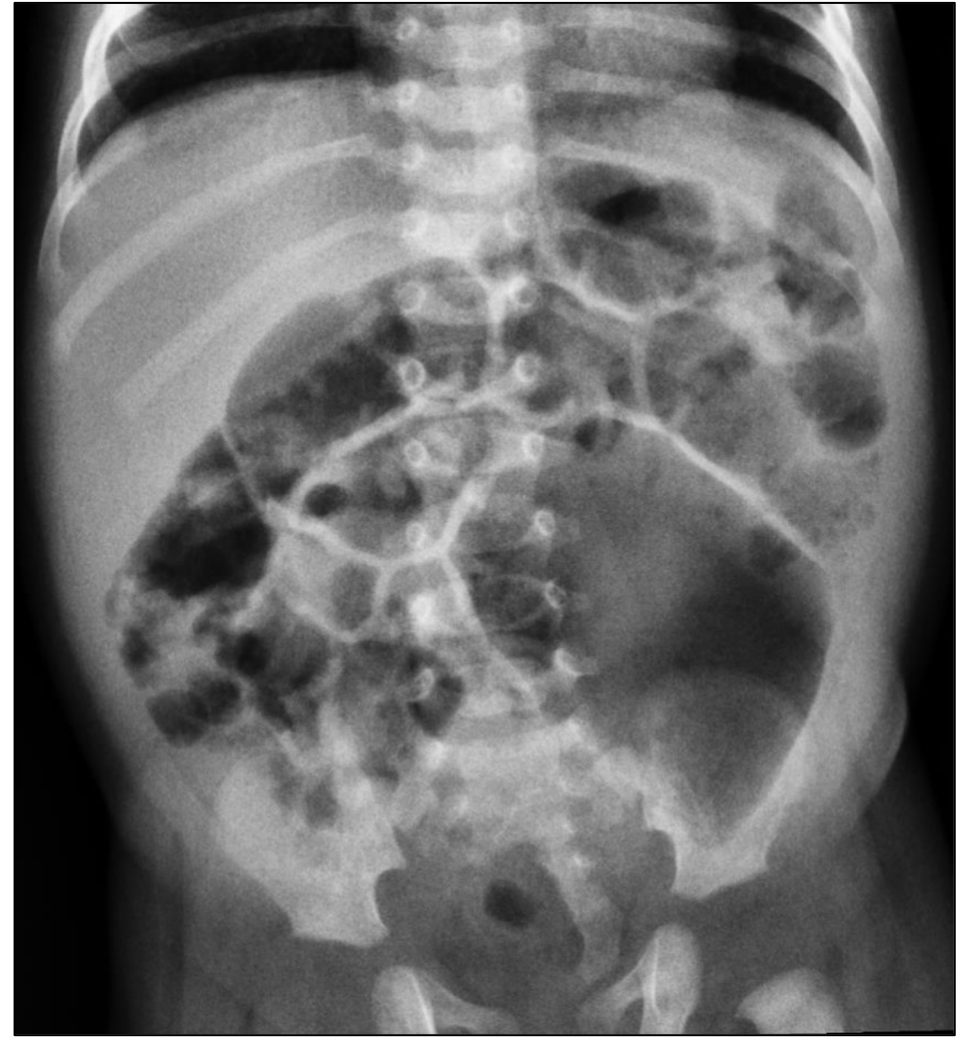
Hegar dilators: 7-7,5/day

- **2 months ambulatory revision:**
 - **Pain** with dilators.
 - **Occasionally** spontaneous defecation
 - **Rx: Persistent dilatation** of the large bowel



Case

- **Plan?**
 - A. Hegar dilatations
 - B. Pneumatic and Hegar dilatations
 - C. Colostomy and then Pull-through
 - D. Colostomy + Pull-through



Case

- **Our plan...**

Now: Colostomy → Pull-through

Myelomeningocele repair: Neuros. criteria



Case Discussion

- **Actual plan?**
- **Alternatives approaches?**
- **A “better” strategy?**
- **Myelomeningocele repair?**

Thank You!

