Case #4

02/15/2024



Children's Hospital Colorado

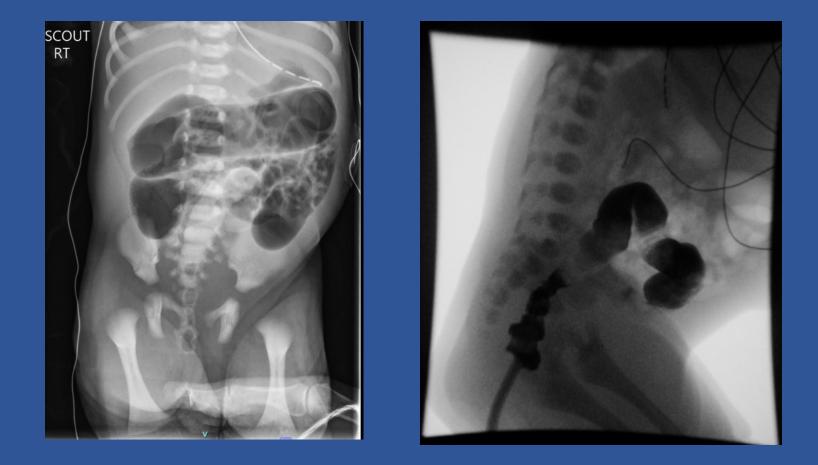


1 yo male patient born and operated due to Hirschsprung disease, complicated by anastomotic leak, requiring diversion (ileostomy); followed by ileostomy closure.

Reason for consultation: unable to wean dilations.

Newborn images





Contrast enema prior to ileostomy closure



With this history, what would be <a>vour approach?

- 1. Rectal examination under anesthesia
- 2. Full thickness rectal biopsy
- 3. Contrast enema
- 4. Continue dilations indefinitely
- 5. Inject botox or steroids
- 6. More than one option
- 7. I don't know



 Our plan was for rectal examination under anesthesia with biopsy + repeat the contrast enema.

• Found severe stricture that it was not possible to do a biopsy.









Contrast

 enema now
 prior to
 reoperation
 for stricture

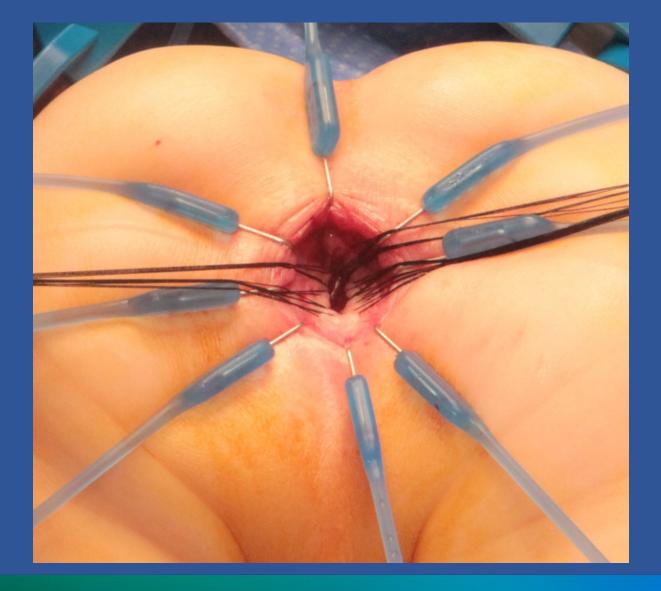






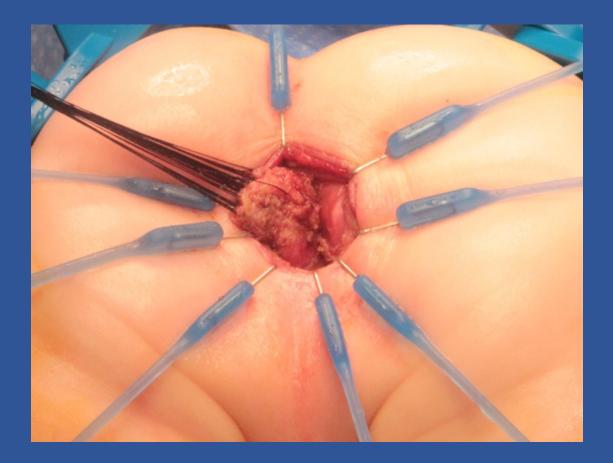




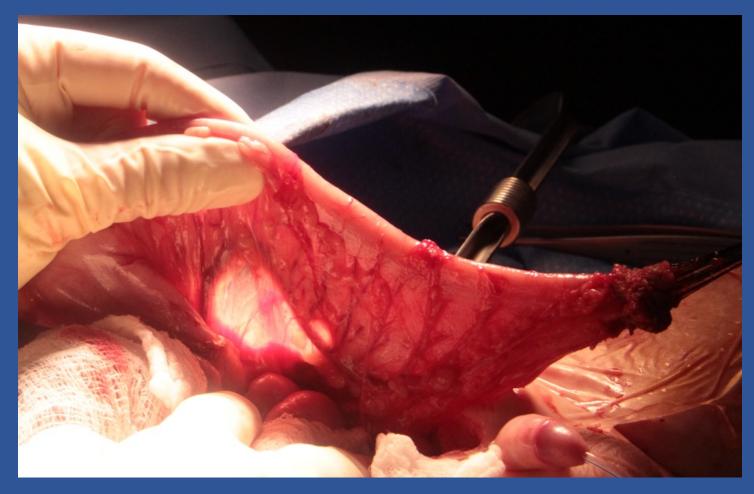
























 In reoperations, we never guarantee bowel control.

•We have this discussion PRIOR to the reoperation with parents.