COLORECTAL WEB MEETING OCTOBER 27th, 2022





COLORECTAL AND UROGENITAL CARE

Case



- 18-year-old boy
- CHARGE syndrome
- Neuromuscular disorder & congenital anomalies
- Chronic constipation

Background



- 1 month: G-tube and Nissen fundoplication
- 8 years: constipation treated with Senna and Miralax
- 9-12 years: involuntary bowel movements everyday with Miralax and Senna, significant abdominal distension





- 13-14 years: G tube fed, abdominal distension and bloating after feeds with increasing discomfort
- 15 years: ED visit due to respiratory distress due to abdominal pain and distension
- Sigmoid volvulus reduction with colonoscopy

X-RAY



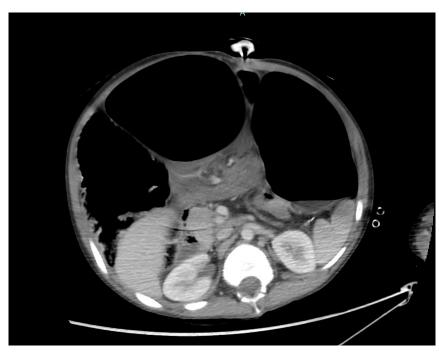


CT











What would you do next?

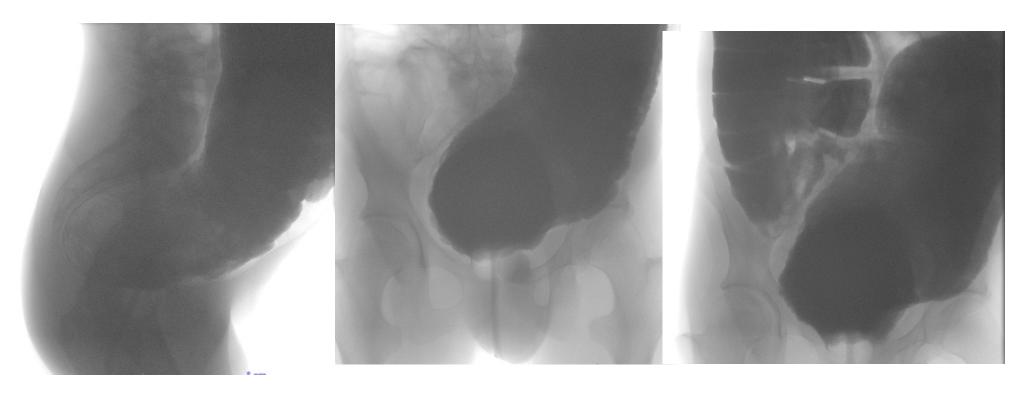
- Bowel managment with Senna
- Rectal enemas
- Sigmoidectomy





- 16 years: postoperatively no abdominal distension; stooling daily with Miralax and fibers
- 17-18 years: worsening abdominal distension and abdominal pain; contrast enema was performed





What would your approach be?



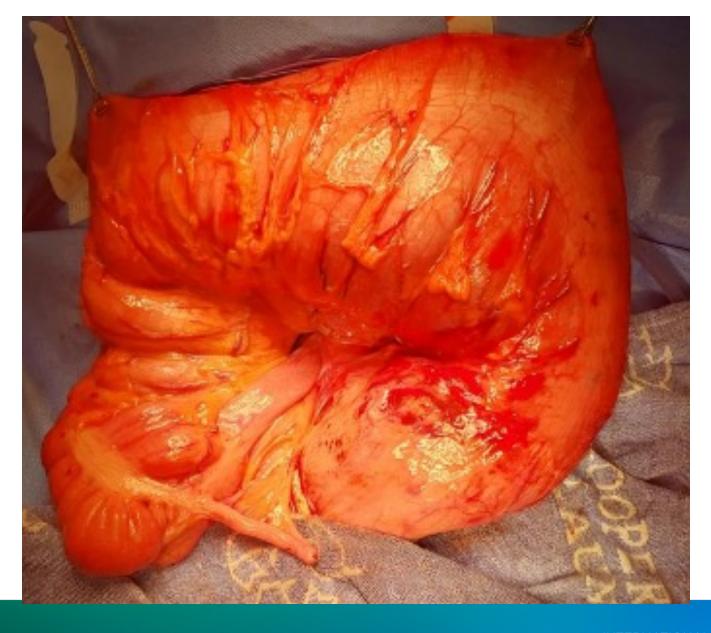
- 1. Continue with Miralax and Senna
- 2. Conduct rectal enemas
- 3. Conduct exam under anesthesia and rectal biopsy



First consultation

- May 2022: First consultation at CC:
- PE: abdominal distension
- EUA: digital desimpaction massive stools, and transanal full biopsy:
 Rectum, biopsy:
- Ganglion cells present in complete neural units
- Calretinin immunoreactive mucosal neurites







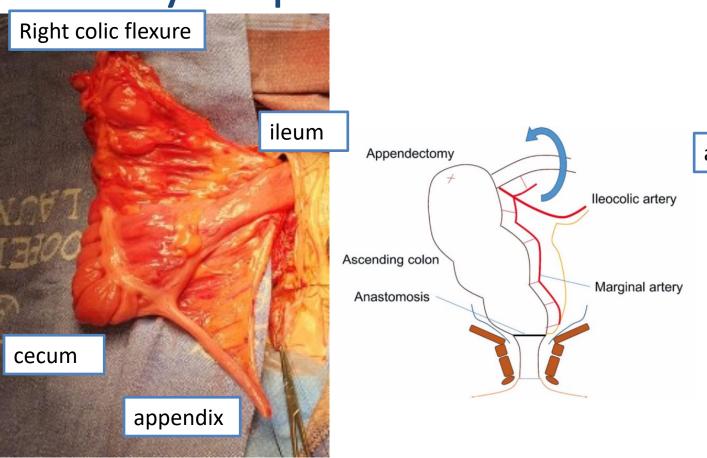
- 1. Ileostomy
- 2. Ileo-anal pull through
- 3. Deloyers procedure
- 4. Turnbull procedure

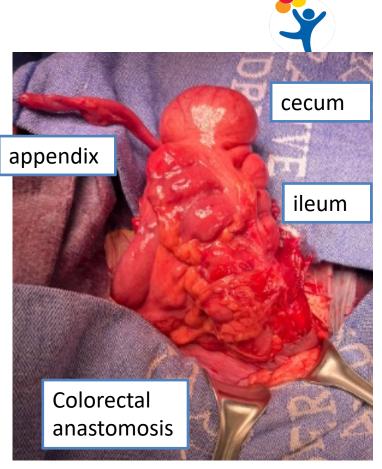
Surgery



- 1. Exploratory laparotomy
- 2. Near total colectomy
- 3. Colorectal anastomosis (Deloyers)
- 4. Creation of continent enterostomy

Deloyers procedure

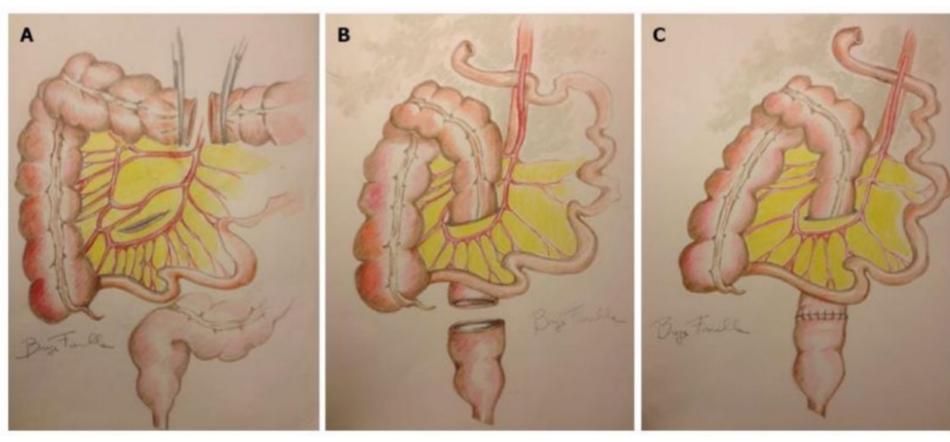




Okamoto, K., et all. Extended Left Colectomy with Coloanal Anastomosis by Indocyanine Green-guided Deloyers Procedure: A Case Report. Journal of the anus, rectum and colon, 2021,5(2), 202–206.

Turnbull procedure





Sileri P, et all Retroileal trans-mesenteric colorectal anastomosis. World J Surg Proced 2013; 3(3): 25-28









- Tolerating oral and G-tube feeds
- Stooling everyday after enema
- No discomfort or distension



Thank you

INTERNATIONAL CENTER FOR COLORECTAL AND UROGENITAL CARE