

COLORECTAL WEB MEETING DECEMBER 15, 2022 Hospital Infantil de Mexico Federico Gomez Mexico City

CENTRO

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CASE

- FEMALE
- □18 YEARS OLD
- □ ANORRECTAL MALFORMATION RECTOVESTIBULAR FISTULA
- ABSENT VAGINA
- FECALLY CONTINENT
- □SR: 0.6



BACKGROUND

- 8 MONTH: **PSARP & "DISTAL VAGINOPLASTY": LOWER VAGINAL ATRESIA**
- ■12 YEARS: SEVERE ABDOMINAL PAIN
 - EXPLORATORY LAPAROTOMY + DRAINAGE OF HEMATOCOLPOS + LEFT VAGINOSTOMY : 350 CC

□13 YEARS: DISFUNTIONAL VAGINOSTOMY: **DRAINAGE OF**

HEMATOCOLPOS: 50 CC

- CONTINUE WITH FEVER AND PAIN
- EXPLORATORY LAPAROTOMY + RESECTION OF LEFT REMANENT VAGINA + DRAINAGE OF PELVIC ABCESS

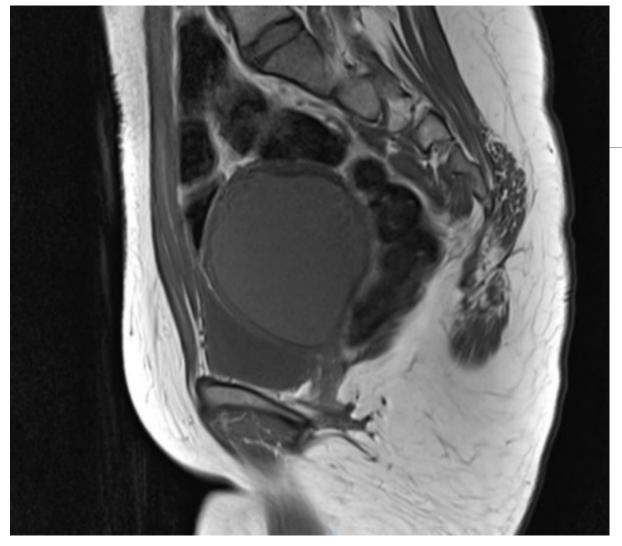


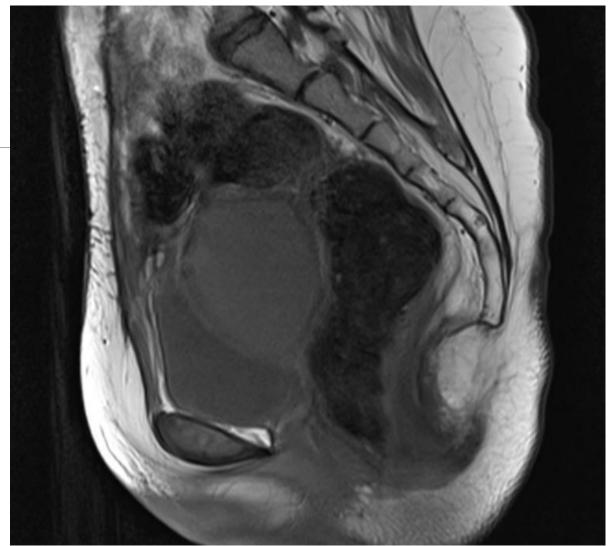
BACKGROUND

- ☐ 16 YEARS: POSTOPERATIVELY NO ABDOMINAL DISTENTION, STOOLING DAILY
 - SHE STOPPED DOING VAGINAL DILATATIONS
 - ☐ MENSTRUAL PERIODS THROUGH VAGINOSTOMY

■ 18 YEARS ARRIVED AT COLORECTAL CLINIC: EXAMINATION UNDER ANESTESIA:







What would your approach be?



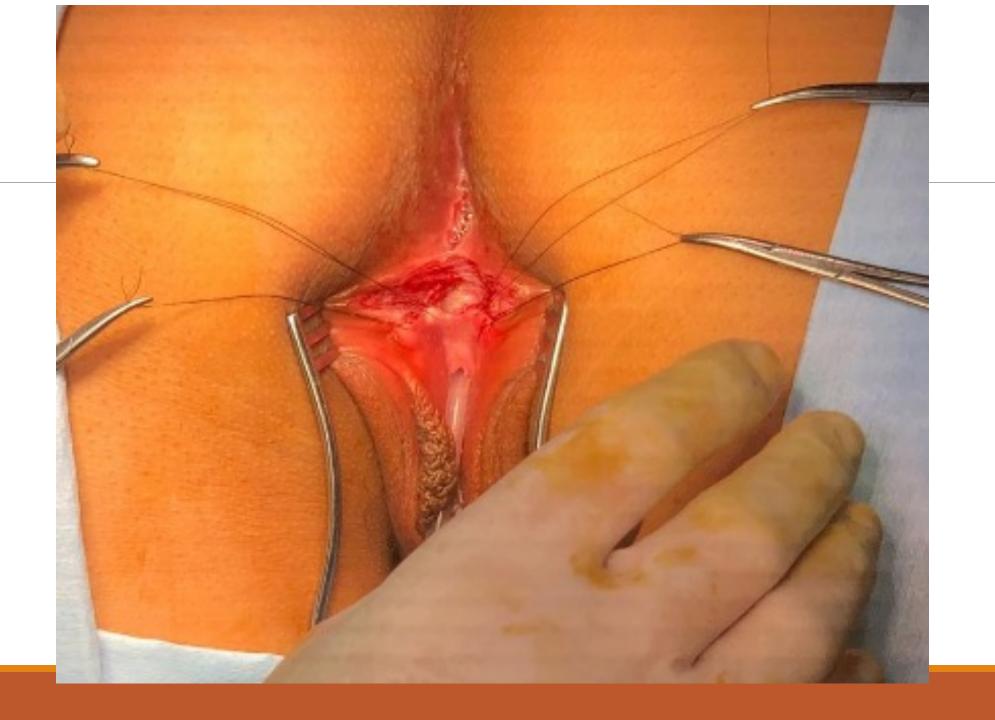
1. TRANSANORECTAL ANTERIOR SAGITAL APPROACH AND PROXIMAL VAGINAL PULL THROUGH

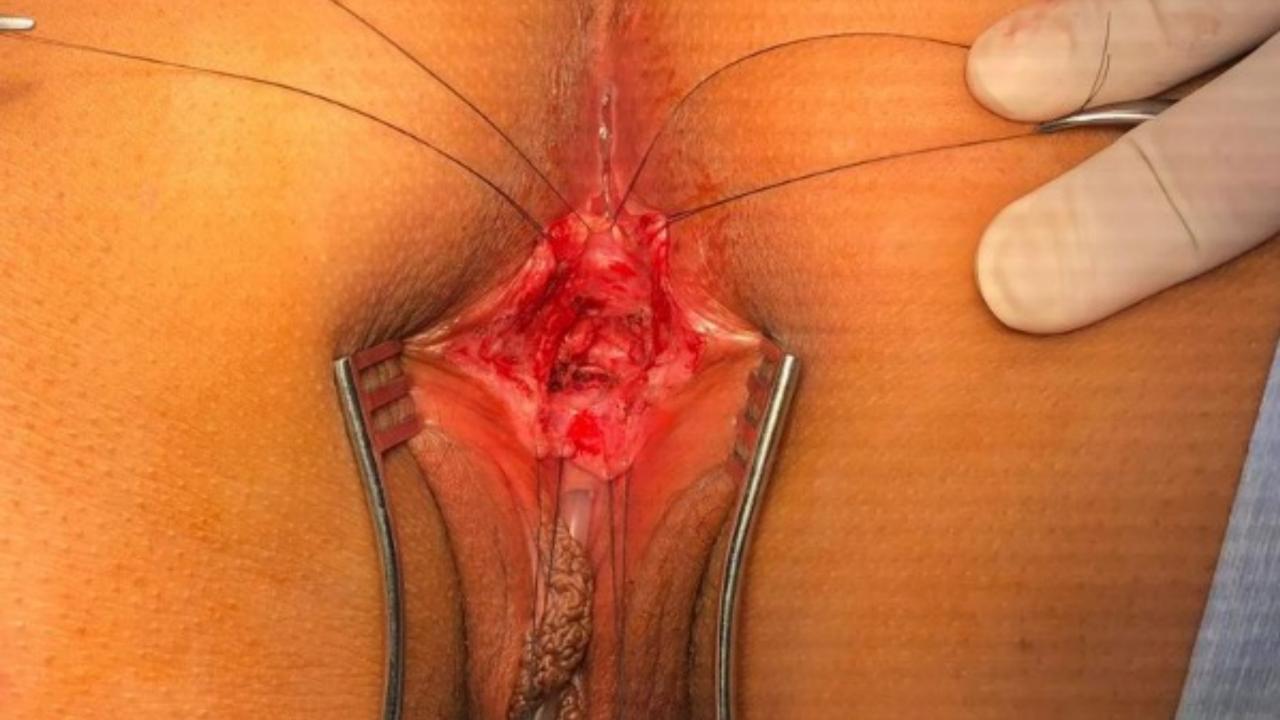
2. TOTAL VAGINAL REPLACEMENT WITH BOWEL

3. POSTERIOR SAGITAL APPROACH WITH MOVILIZATION OF RECTUM AND PROXIMAL VAGINAL PULL THROUGH



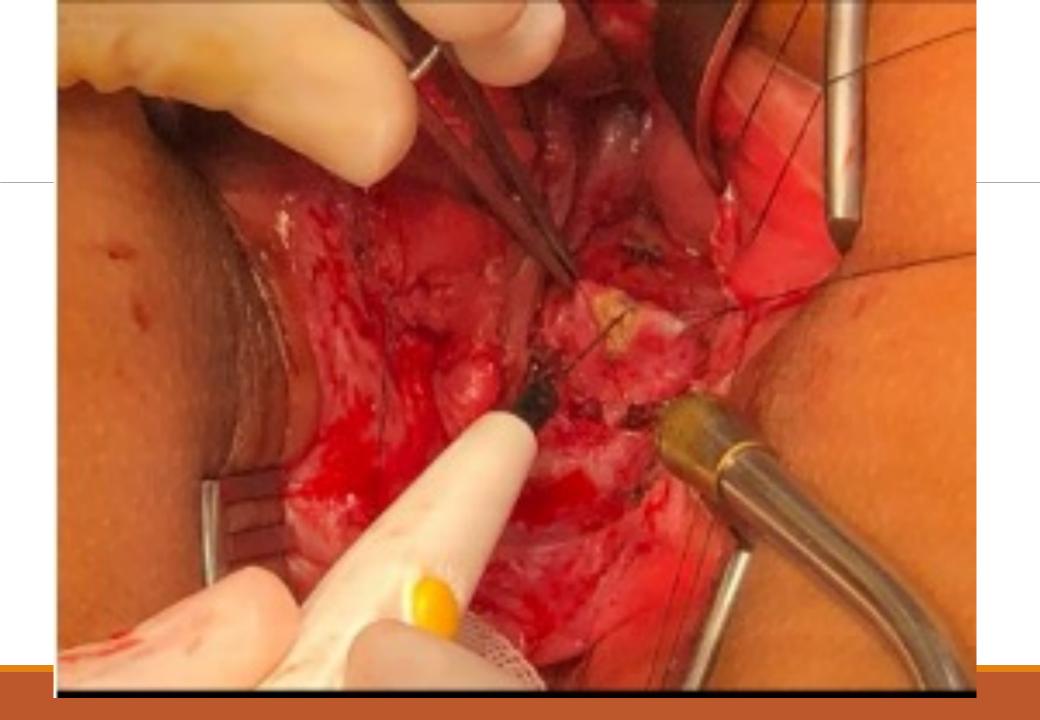


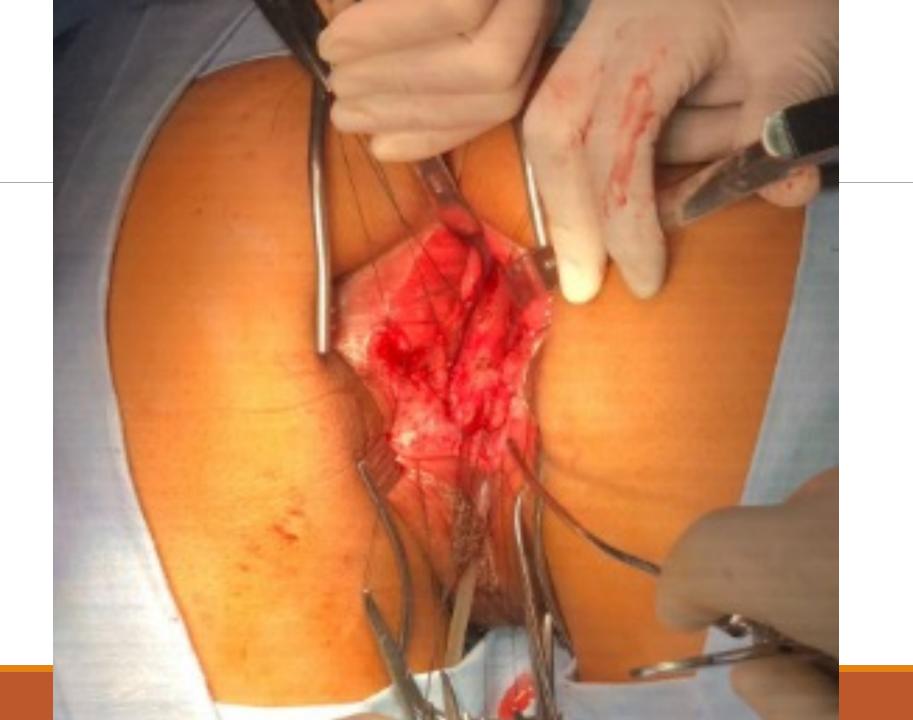




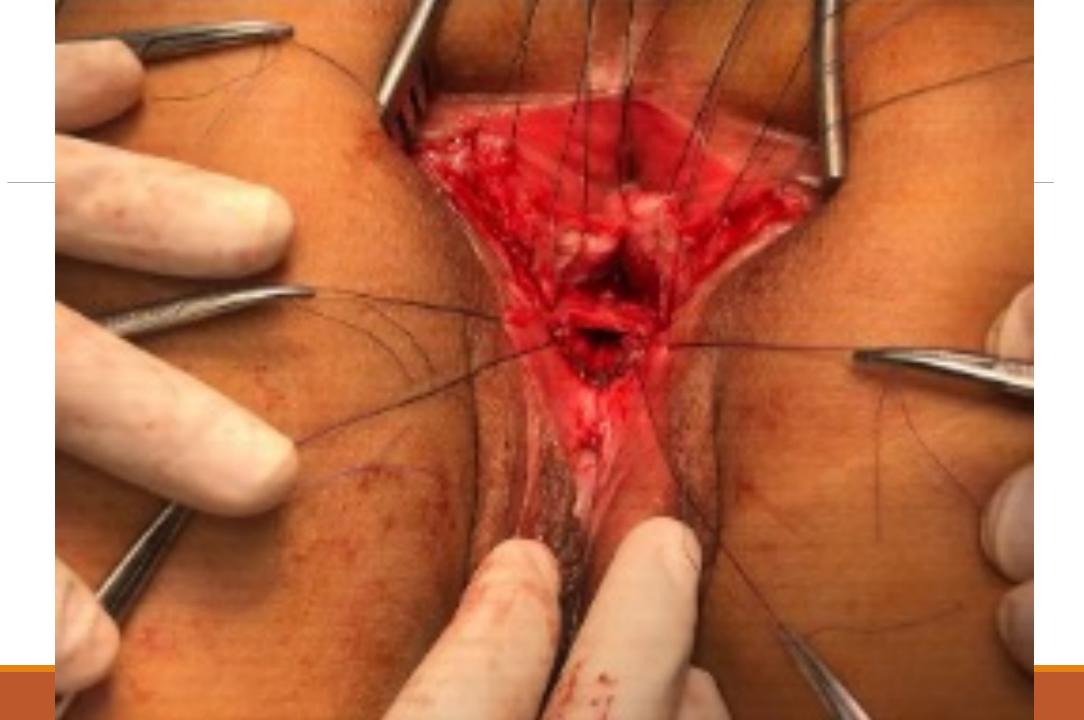


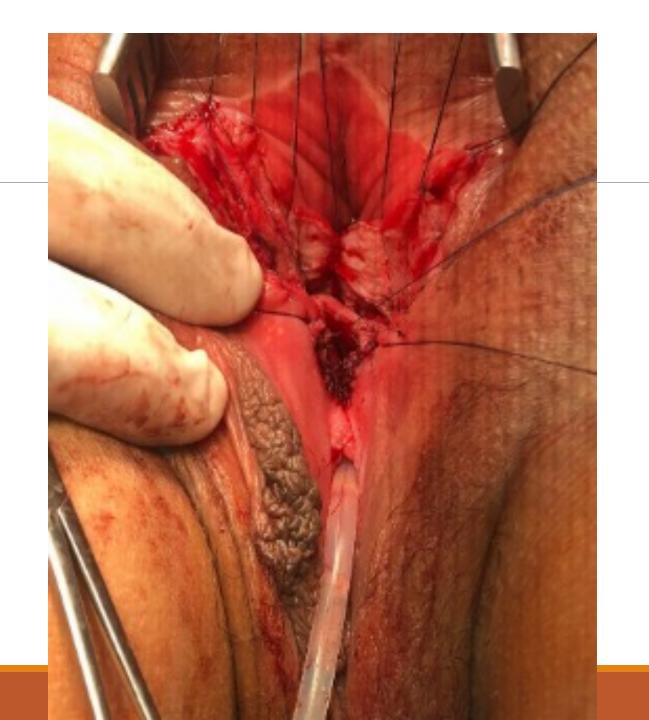


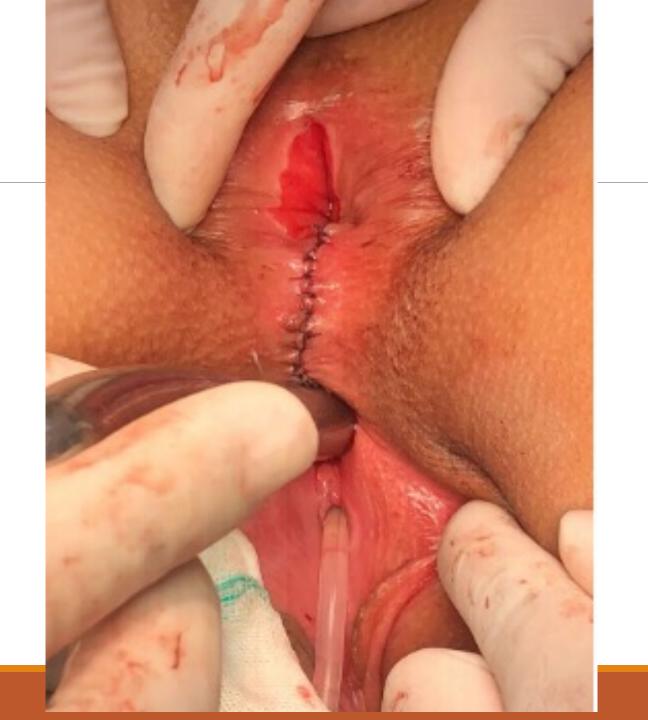












OUTCOME

NORMAL PERIODS THROUGH VAGINA

EUA SCHEDULED IN THE NEXT 3 MONTHS



FECALLY CONTINENT

