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Endosonographic Study of Anal Sphincter after Soave and Transanal Procedures, In Patients with Hirshsprung's Disease.

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Abstract

Purpose: The aim of this study was to compare bowel function in patients with Hirschsprung's disease after abdominal endorectal pull-through (Soave) versus transanalendorectal pull-through (TEPT) both clinically and by using transanal endosonography.

Material& Methods: Thirty patients with Hirschsprung's disease underwent abdominal endorectal pull-through (Soave) (group 1) or TEPT (group 2) in Cairo University Children's Hospital from November 2004 till Jannuary2008. Fifteen patients were included in each group. All cases were classic recto sigmoid type. Transanalendosonography was done in all cases in King Fahd Unit, Cairo University. Transanalendosonography was done both preoperatively and about two and six months after surgery for each patient. Clinically, the patients were evaluated according to the modified Wingspread Scoring.

Results: In patients after Soave's operation (Group 1); 11 cases were clinically continent in early post operative period, 4 cases had occasional soiling. Endosonographic studies showed minimal interruption of the external anal sphincter (EAS) in

3 cases, who suffered some occasional soiling in early postoperative period. Partial interruption of the hyperechoic external

anal sphincter was found in one case that suffered from soiling in late post operative follow up. After six months, 13 cases had normal bowel function, one case had occasional soiling, one patient had adhesive obstruction, and one case had constipation which responded to dilatation. Endosonographic image after six months showed no image changes. There was no

interruption of the hypoechoic band of internal anal sphincter in this entire group. In patients after transanal procedure (group2); 8 cases were clinically continent in early post operative period, 7 cases had occasional soiling. After six months

cases had normal bowel function, and one case had constipation which responded to dilatation. Endosonographic studies showed minimal affection of the EAS in 7 cases, none of these endosonographic changes continued after six months. There

was no interruption of the hypoechoic band of internal anal sphincter in any patient in this group.

Conclusion: Normal bowel function was established in all patients after transanal procedure. The postoperative clinical and

transanalendosonographic evaluation proved that transanal procedure is both save, effective and is associated with minimal

injury to the anal sphincters compared to Soave procedure.

Index Word: Endosonography, Hirschsprung's disease, Soave, Transanal pull-through.