A simple transanal technique to complete perineal dissection of a proctectomy when the limits are not visible from above or below

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A video demonstrating this technique is available at:
<http://publishing.rcseng.ac.uk>

BACKGROUND

An intersphincteric dissection is often used in a proctectomy for benign pathology such as ulcerative colitis,¹ thereby avoiding a large perineal defect. The narrow confines of this approach can make the dissection technically challenging, especially when compounded by body habitus or a narrow pelvis.² Transanal minimally invasive surgery (TAMIS)³ has been developed for both local and extensive resections involving the low and midrectum,⁴ usually requiring a single incision laparoscopic surgery port and development of skills to perform extensive transanal resection. A transanal approach using simple theatre equipment to create a single glove port has been reported⁵ but is seldom used as an option in difficult cases.

TECHNIQUE

Having reached the limits of visualisation for intersphincteric dissection from the perineum and from the laparoscopic approach above,

with the specimen still not free, an Alexis[®] wound retractor (Applied Medical, Rancho Santa Margarita, CA, US) is inserted into the space developed internal to the external sphincter. A sterile latex glove is stretched over the retractor and insufflated through a 10mm port, inserted through a finger of the glove and secured with a tie (Fig 1). Insertion of a laparoscope then allows visualisation of the upper limits of dissection. Further ports can be inserted, enabling laparoscopic instruments to be used in the remaining dissection.

DISCUSSION

We demonstrate and encourage a method, drawing on a previously described TAMIS technique using standard laparoscopic equipment, as an option in difficult proctectomies. This approach is relatively inexpensive and does not require much adjustment for the surgeon to complete the proctectomy.

References

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Figure 1 Equipment used