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Transperineal Repair Is Ideal for the Management of Rectocele with Faecal Incontinence

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Abstract : Rectocele may be associated with symptoms of both obstructed defecation and faecal incontinence. Currently, numerous operative techniques exist to treat patients with rectocele; however, no single technique has emerged as the optimal approach in patients with post-partum faecal incontinence. The purpose of this study was to evaluate the clinical outcome in a consecutive series of patients who underwent transperineal repair of rectocele for patients presenting with faecal incontinence as the predominant symptom. Twenty-three consecutive patients from April 2000 to July 2015 with symptomatic rectocele underwent transperineal repair by a single surgeon. All patients had a history of vaginal delivery, with or without evidence of associated anal sphincter injury at the time. The median age of the cohort was 53 years (range 21 to 90 years). The median operating time and length of hospital stay were 2 hours and 7 days, respectively. Two patients developed urinary retention post-operatively, which required temporary bladder catheterization. One patient had wound dehiscence, which was managed by absorbent dressing applied by the patient and her carer. There was no operative mortality. In all patients with rectocele, there was a concomitant anal sphincter disruption. All patients had satisfactory improvement with regard to faecal incontinence on follow-up. This study suggests this method provides excellent anatomic and physiologic results with minimal morbidity. However, because none of the patients gained full continence postoperatively, pelvic floor rehabilitation might be also needed to achieve better sphincter function in patients with incontinence.

Keywords: anal sphincter defect, faecal incontinence, rectocele, transperineal repair

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