

JOINT EVENT

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Stapled hemorrhoidectomy: Pitfall and severe complications**Chung Hung Yeh**

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Stapled transanal mucosectomy, firstly aiming to treat rectal internal mucosal prolapse and obstructed defecation, is proposed by Dr. Antonio Longo for the treatment of hemorrhoids. Subsequently called stapled hemorrhoidopexy or procedure for prolapse and hemorrhoids (PPH), the technique gained a wide popularity due to the low postoperative pain. Almost all studies, with a few exceptions, also found an early return to work. In 2005, the practice parameters of the ASCRS (American Society of Colon and Rectal Surgeons) commended: Stapled hemorrhoidopexy is a new alternative available for individuals with significant hemorrhoidal prolapse. Meanwhile, exceptionally rare but potentially devastating complications including anovaginal fistula, substantial hemorrhage, fistula, retroperitoneal sepsis, rectal perforation have been reported. Even though the documented adverse events happen scattered and presented as case-report, severe complications have been reported world-wide. It did raise the concern about the safety of this new procedure. Performing the procedure with care and sharing the experience with each other could help surgeons keep away from trouble. In Taiwan, we use stapled hemorrhoidopexy to treat patients with prolapsed hemorrhoids since 2001. More than eight hundred cases of my patient accepted this treatment and no severe complication has ever been encountered. We shall share our experiences of these new-adapted procedures, share a case of retrorectal abscess referred from other hospital and discuss the tricks to improve the results and to avoid the complications.

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