

Repair of Recurrent Rectal Prolapse with Perineal Approach and Placement of Next Generation Decellularized Dermal Allograft (DermaPure®) as a Pelvic Floor Hernia Repair.

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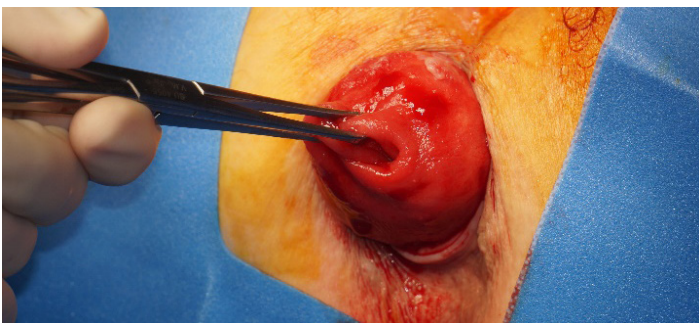
Background

Rectal prolapse is a common condition in women as they age and is related to a series of muscle diastases and hernias of the pelvic floor. The common physical exam findings will be perineal descent (pelvic laxity with a rocker bottom defect) and decreased muscle tone with a rectal drainage of thin clear mucous.

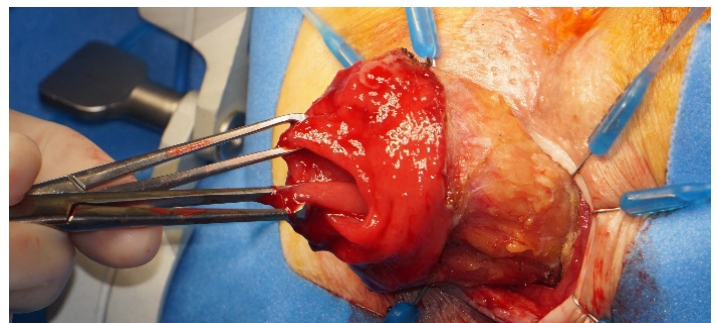
Clinical Presentation:

- 90-year-old female with history of diabetes and hypertension underwent a perineal repair and levatorplasty for rectal prolapse 2 years ago.
- Patient now presents with complaints of recurrent prolapse, outlet obstruction constipation with incontinence, and pelvic pain. (Fig.1)
- On exam patient has a classic rocker bottom defect with decreased tone, significant perineal laxity, and a thin watery mucous discharge.
- The anterior rectal wall is partially prolapsed at rest.

Intra-Operative Findings:

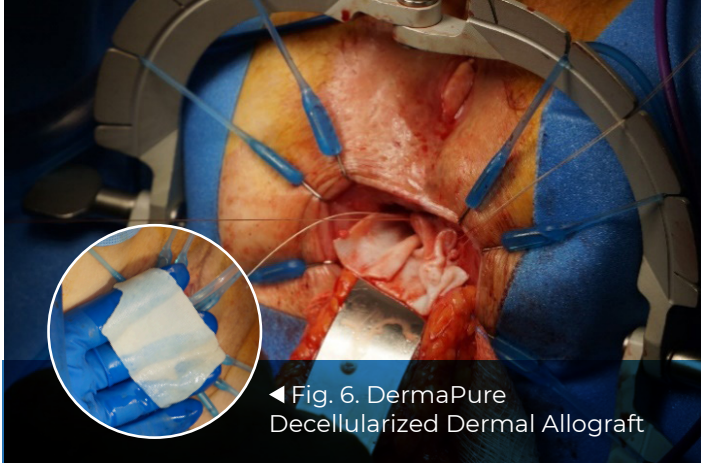


▲ Fig 1. A recurrent rectal prolapse with incompetent rectovaginal septum and levator muscle diastasis consistent with pelvic floor dysfunction and laxity



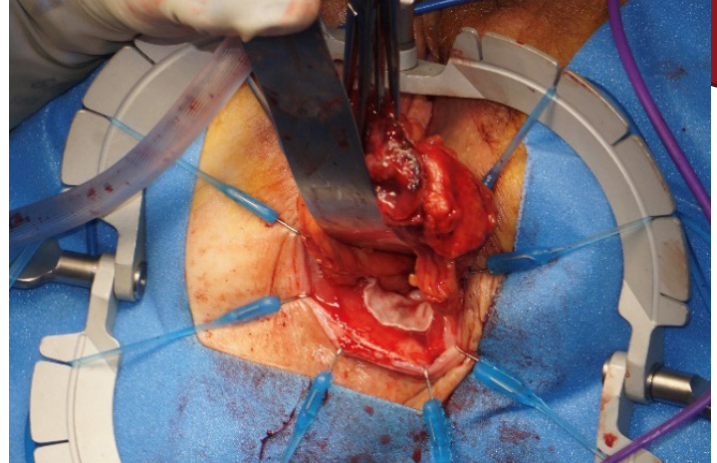
▲ Fig 2. Resection of rectal prolapse via perineal approach

Surgical Implantation of DermaPure:

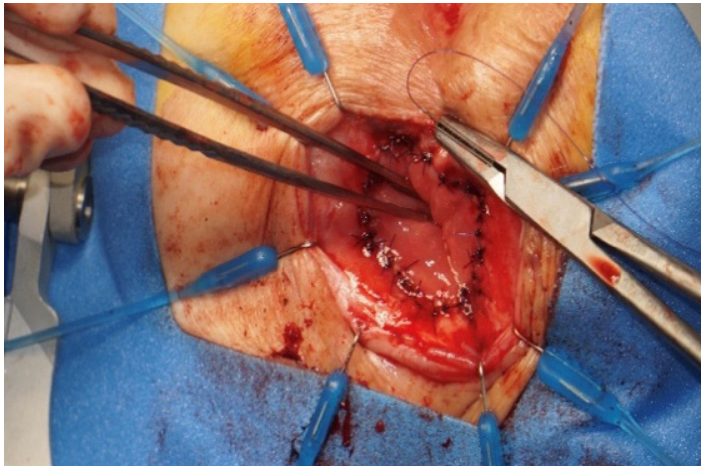


◀ Fig. 6. DermaPure Decellularized Dermal Allograft

▲ Fig. 3. Implantation of DermaPure decellularized dermal allograft in the rectovaginal septum.



▲ Fig 4. Implantation of DermaPure along the levator muscle shelf.



◀ Fig. 5. Intact coloanal anastomosis

Surgeon Perspective:

"The use of decellularized allograft allows for a more thorough repair of a pelvic floor hernia without tension and without artificial materials. In principle, this should decrease the overall recurrence rate of the prolapse and improve the symptoms of perineal laxity without the risk of foreign body erosion."

Post-Operative Results:

- Patient had an immediate relief of discomfort related to the rectal prolapse
- Post-op 12-weeks: Patient is experiencing almost no further outlet obstruction constipation and is having improved sphincter function

DermaPure Decellurized Dermal Allograft		
030400HD	3 cm x 4 cm	DermaPure Decellularized Dermal Allograft
040600HD	4 cm x 6 cm	DermaPure Decellularized Dermal Allograft
071000HD	7 cm x 10 cm	DermaPure Decellularized Dermal Allograft