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TRAUMATIC CLOACA REPAIR

Hypothesis / aims of study

Traumatic cloaca secondary to obstetric injury is rare. It may result in total fecal incontinence, sexual dysfunction and a great amount of distress for patients affected. We present our experience in repairing traumatic cloaca.

Study design, materials and methods

Between 2010 and 2012 three women with traumatic cloaca underwent repair by a single surgeon. In all patients a repair involving X flaps across the perineum, division of anovaginal septum, levatoroplasty, sphincteroplasty was performed. Fecal diversion was unnecessary. Preoperatively, patients had complete incontinence.

Results

There were no wound-related complications, and complete healing and bowel function was achieved within the first postoperative month. Sexual abstinence was advised for 3 months post procedure. All patients had no postoperative incontinence at 3-months follow-up.

Interpretation of results

Concluding message

Repair of traumatic cloaca using X flaps is associated with satisfactory functional and cosmetic results. Fecal diversion was unnecessary in this small series.

Disclosures

Funding: No funding, no disclosures **Clinical Trial:** No **Subjects:** HUMAN **Ethics not Req'd:** This is not a trial, but a case-series report **Helsinki:** Yes **Informed Consent:** Yes