

An unusually long stomal prolapse in a paediatric patient

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Description

Colostomy formation is an important initial surgical step done in the management of infants and children with anorectal malformation. The complications of this surgery include prolapse, stenosis, retraction, dysfunction and parastomal hernia. Though stoma prolapse is one of the common complications seen, we report the clinical images of a 2 year old child who presented with 10 inches long irreducible prolapse of the intestine through the stoma done for anorectal malformation (Figure 1).

A laparotomy was done, which revealed adhesions at multiple sites to be the cause of irreducible prolapse. The adhesions were meticulously dissected and the intestinal loops were fixed at places to the abdominal wall with stay sutures to prevent re- prolapse (Figure 2). The new stoma created was fixed by few interrupted stitches with an absorbable 2-0 chromic catgut. Ethoxysclerol was also injected around the stoma to cause further fibrosis and prevent prolapse (Figure 3).

Figures



Figure 1: showing prolapse through the colostomy site



Figure 2: Intestinal loops being fixed to the abdominal walls with sutures



Figure 3: New stoma being created

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