Clinical Outcomes of Perineal Proctectomy Among Patients of Advanced Age

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I have no disclosures
Rectal Prolapse

Typically occurs in elderly female patients, often with multiple medical comorbidities

Perineal approach is preferred in these patients
- lower risk than abdominal operation
- can be done under local or regional anesthesia
- however, increased rate of recurrence vs. abdominal operation
Increasing Numbers of Elderly

Figure 2-1. Total Population by Age and Sex: 1900, 1950, and 2000

Source: U.S. Census Bureau, decennial census of population, 1900, 1950, and 2000.
Should perineal proctectomy be offered to very elderly patients?
Study Population

465 patients undergoing 518 perineal proctectomies, 1994-2012

95% female, 5% male

Age:

- <70 Group A n=113
- 70-79 Group B n=113
- 80-89 Group C n=208
- ≥90 Group D n=84
Operative Data

Mean estimated blood loss 25cc

Mean length of resected specimen 7cm

Almost 50% of patients had levatorplasties in all age groups
Overall Results

Mean length of stay four days

Immediate and late complication rates 5.6 and 3.5%, respectively, majority of complications were minor

Two postoperative deaths, both with anastomotic dehiscence, one also had mesenteric thrombus

Recurrence 22.6%
Age-Specific Outcomes

Complication rate did not vary by age

Recurrence rate was actually lowest in the elderly:

- Group A  33.6%
- Group B  23.9%
- Group C  19.7%
- Group D  14.3%  \( p=0.007 \)

Elderly patients were less likely to have reoperation if rectal prolapse recurred; most were managed nonoperatively
Survival

Years

Group A

Group B

Group C

Group D
Conclusions

Perineal proctectomy is a safe procedure with an acceptable recurrence rate.

 Appropriately selected elderly patients have similar outcomes compared to younger patients.

The median life expectancy after perineal proctectomy for patients in their nineties is four years, so the risk of surgery is worth the benefit accrued.
Thank You