

SURGICOM PATIENT INFORMATION LEAFLET

ANTERIOR RESECTION OF RECTUM



GENERAL INFORMATION

An anterior resection is the removal of the lowest part of the large bowel usually with joining of the two ends, very close to the anus. This operation is usually done to remove a cancer of that part of the bowel. Sometimes it is combined with making of a pouch just above your anal canal and sometimes also with making a diverting stoma in your bowel (a bag). Your doctor would have discussed with you exactly what he proposes to do.

Keep in mind that his findings at operation may change his proposed operation.

DIAGNOSIS

You presented to your doctor with symptoms relating to rectal disease. You were possibly also investigated with a colonoscopy and/or a barium enema.

Your doctor has decided that it is appropriate to treat you by means of an anterior resection of your rectum.

PRE-OPERATIVE PREPARATION

- You will need to have your large bowel cleansed before the operation.
- Your doctor will explain to you whether he wants this done at home or whether he needs you to be admitted to hospital for bowel preparation. This preparation is very important.
- Make sure your doctor knows what medicines you take, especially medicines which may affect blood clotting.
- You must not eat or drink anything for 6 hours before the operation.

THE OPERATION

- You will be asleep for the operation.
- The operation usually takes 2 to 3 hours.
- Your doctor would have discussed with you whether he proposes to give you a temporary bag (colostomy) or whether he proposes to do an anastomosis without the need for a bag.

POST-OPERATIVE CARE

- You will wake up in the recovery room or in the intensive care unit.
- You will have an infusion into your arm, neck or chest. You may have a tube through your nose into your stomach. You will have a catheter in your bladder. The anaesthetist may have decided to do an epidural on you for pain control.

- When you are well enough to leave the intensive care unit you will be returned to your usual hospital bed.
- At an appropriate time your stitches will be removed.

HOME CARE

- You will be instructed to what extent you are allowed to walk around.
- If you have a colostomy (bag), you will be instructed regarding its care
- You will be instructed regarding bathing and showering.
- You will be instructed by your doctor regarding driving and returning to work.

COMPLICATIONS

- An anterior resection is a major abdominal operation and complications do occur. You must be aware of the following possible complications.
- Even if your doctor has decided that he is going to do a resection and anastomosis, you must be aware of the fact that sometimes a situation may arise while you are under anaesthetic that may make your doctor decide that it would be safer for you if he gave you a colostomy.
- The most important complication is a leak from the anastomosis. This may necessitate re-operation or may lead to an intestinal fistula. It may lead to a major intra-abdominal infection and peritonitis. It may lead to intra-abdominal abscesses.
- Wound infections of the abdominal wound occur fairly commonly. If this happens, your doctor will decide how best to manage it.
- Intra-abdominal complications or infections can occur which may necessitate a re-operation.
- Chest infections are fairly common after this operation. This is the reason that your doctor will probably order chest physiotherapy.
- In a man, it is quite common for this operation to have an adverse effect on your sexual activities
- Deep vein thrombosis, pulmonary embolism and heart attacks are possible after any major operation.

