Annex 2.4(a)31

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THE IMPACT OF ENDOANAL ULTRASOUND IN THE DIAGNOSIS OF ANORECTAL DISODERS

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Introduction

Diagnosis of anorectal disorders has been very much improved with the availability of diagnostic tests such as manometry, endo-anal ultrasound, static and dynamic pelvic magnetic resonance imaging, electromyography and pudendal nerve terminal motor latency studies. Endoanal ultrasound (EAUS) has demonstrated high sensitivity and specificity for the structural imaging of anorectal pathology.

Material and methods

Olympus 12 megahertz ultrasonography probe was used in a consecutive series of patients (n=49) presenting with anorectal disease to the anorecatal physiology laboratory. Analysis was done to assess the impact of EAUS in the diagnosis and treatment of anorectal disease.

Results

A total of 49 patients underwent EAUS over a period of 10 months. Male to female ratio was 3:1. Median age was 39 years (range 12-65). Indications for EAUS were recurrent fistula-in-ano 35%, sphincter injury 14%, complete rectal prolapse 10%, carcinoma of the rectum 8%, previous surgery for imperforate anus 8%, urge incontinence 8% and other 17%. EAUS was diagnostic in 49%, provided useful information in 33% and was of no value in 18%.

Conclusion

Endo anal ultrasound scanning was either diagnostic or provided useful information in 82% of the patients. Thus nature and extent of sphincteric lesions can be determined and the surgical procedures can be planned.