

PICTURES IN DIGESTIVE PATHOLOGY

Importance of retroflexion in the rectum during colonoscopy

J. García-Cano, C. Jimeno-Ayllón, R. Martínez-Fernández, L. Serrano-Sánchez and A.K. Reyes-Guevara

Department of Digestive Diseases. Hospital Virgen de la Luz. Cuenca, Spain

CASE REPORT

A 42-year-old male patient consulted several times for recurring episodes of bleeding per rectum. An anal source was clinically suspected from the beginning due to the pattern of blood expulsion after passing stools. The patient had been studied for this reason and had undergone two colonoscopies under deep sedation with propofol. Small size hemorrhoids were observed and different kinds of treatments were applied. As bleeding per rectum continued, the patient was referred to Surgery. In physical exam (anal inspection and anoscopy) the surgeon did not remark enough hemorrhoidal engorgement as to prescribe an operation. He ordered a third colonoscopy exam. In this occasion it was performed with the patient unsedated.

In this third procedure, with the endoscope in retroflexion in the rectum, a polyp with stalk was observed located a few centimetres above the pectinate anal line (Fig. 1). The examination continued until the cecal pole and no more lesions were found. Finally, snare polyp removal was performed (Figs. 2 and 3). No complications occurred.

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Fig. 1. With the colonoscope in retroflexion a pedunculated rectal formation was observed near the anus. This finding had not previously been seen in two colonoscopies in which this manoeuvre was not done.

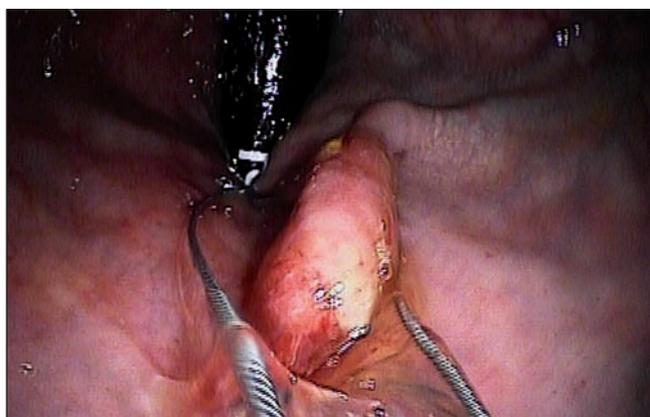


Fig. 2. Diathermy snare polyp removal was performed in a standard fashion. During removal the colonoscope remained also in retroflexion.

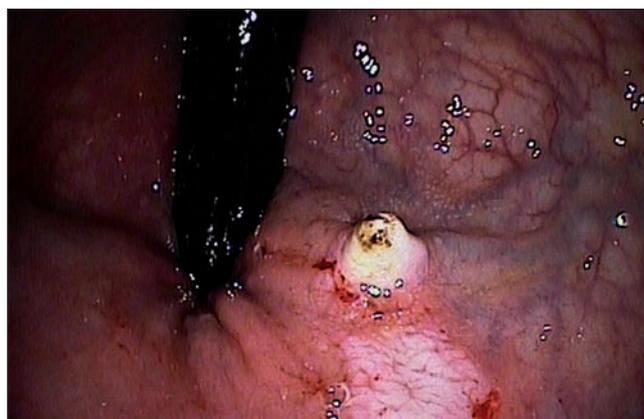


Fig. 3. Coagulated cut stalk after polypectomy. There was a small burn produced by an unnoticed current flow in the rectal mucosa near the pedicle. The patient had no complications after polyp removal.

DISCUSSION

Colonoscope retroflexion in the rectum is one of the basic manoeuvres in colonoscopy (1). Some lesions in the distal rectum and juxtanal zone can remain undiagnosed if retroflexion is not performed. This manoeuvre has to be done carefully because some perforations have been reported (2).

Besides, it is necessary to use other important techniques of colonoscopy, as the straitening of several bendings that form in the colon. Colonoscopy, in general, can be an uncomfortable procedure that usually requires some kind of sedation, nevertheless, experienced endoscopists using a careful technique, can perform successfully a large number of colonoscopies without sedation (3,4).

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