



Journal Homepage: -www.journalijar.com
**INTERNATIONAL JOURNAL OF
 ADVANCED RESEARCH (IJAR)**

Article DOI:10.21474/IJAR01/7123
 DOI URL: <http://dx.doi.org/10.21474/IJAR01/7123>



RESEARCH ARTICLE

COLOSTOMY- A LIFE SAVING PROCEDURE?

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Manuscript Info

Manuscript History

Received: 17 March 2018
 Final Accepted: 19 April 2018
 Published: May 2018

Keywords:-

Jejuno colic fistula, recto urethral fistula,
 colo vesical fistula, colostomy prolapse

Abstract

Sigmoid colostomy done for high and intermediate ano rectal anomalies is always a life saving procedure. Complications like jejuno colic fistula, colo vesical fistula, retracted and non functioning stoma, colostomy prolapse and parastomal hernia poses threat to life of children.

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Introduction:-

ICH being a tertiary institute, all moribund complications are referred from primary and secondary medical colleges. 100 cases of colostomy are done per year in ICH&HC. Complications occurred during and after colostomy were studied retrospectively and protocols formed to prevent complications.

Prevention strategies:-

1. Spur taken in loop colostomy prevents retraction of stoma.
2. Colostomy done in fixed points prevents colostomy prolapse.
3. Adequate anesthesia and small bowel retraction prevents a needle bite over the small bowel during colostomy prevents jejuno colic fistula. General anesthesia and proper positioning of baby prevents small bowel protrusion in loop colostomy preventing para stomal hernia.

DISTAL LOOPOGRAM



Jejunocolic Fistula:-

1. Ensure adequate nutrition and anemia correction to prevent colostomy complications.
2. Retractor and proper protection of urinary bladder and catheterization of bladder prevents colo vesical fistula after Duhamels and ano rectal procedures.

GASTROGRAFFIN ENEMA



Colo -Vesical Fistula



Retracted Colostomy

Conclusion:-

Life saving diversion colostomy should never increase morbidity of patients. Ensure adequate nutrition, electrolyte correction, general anesthesia to prevent jejuno colic and colo vesical fistula. Division of colo vesical and recto urethral fistula with precise surgical dissection prevents recurrent urinary tract infections and ensures adequate weight gain in children.

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