

# Do the preventive ileostomy patients with IBD and rectal cancer need different approach in postoperative period?

Yury Kitsenko, Inna Tulina, Petr Tsugulya, Vitaliy Stamov, Petr Tsarkov

I.M. Sechenov First Moscow State Medical University  
Clinic of Colorectal and Minimally Invasive Surgery

## Background

Patients with intraabdominal operative trauma may have various complications due to different colon resection volume. If the patient undergoes surgery with ileostomy formation, we can evaluate the effect of colon resection volume on postoperative complications.

## Aim

To evaluate the effect of colon resection volume on the incidence of ileostomy-associated complications.

## Materials and methods

We retrospectively selected patients with preventive ileostomy.

**Short-term** characteristics were compared.

**Group 1** – patients after total proctocolectomy with J-pouch for IBD.

**Group 2** – patients after low resection for rectal cancer.

## Results

### Intraoperative results

	Group 1	Group 2	p
Patient number	27	96	-
Male:female	11:16	53:43	0,2
Age	35.8±2.5	59.8±1.1	<0.01*
BMI	20.9±0.6	26.7±0.4	<0.01*
Type of operation			
Ileal Pouch–Anal Anastomosis	100%	-	
Anterior rectum resection	-	4%	
Low anterior rectum resection	-	66%	
Abdomino–anal rectum resection	-	30%	
Laparoscopic approach	74%	59%	
Conversion of approach	1	8	
Technical problems	0	6	
Bleeding	1	1	
Perforation of colon	0	1	
Operation time, min	320±23	252±17	0.003**
Blood loss, ml	224±60	226±17	0.08
ASA	2.2±0.1	2.2±0.1	1.0

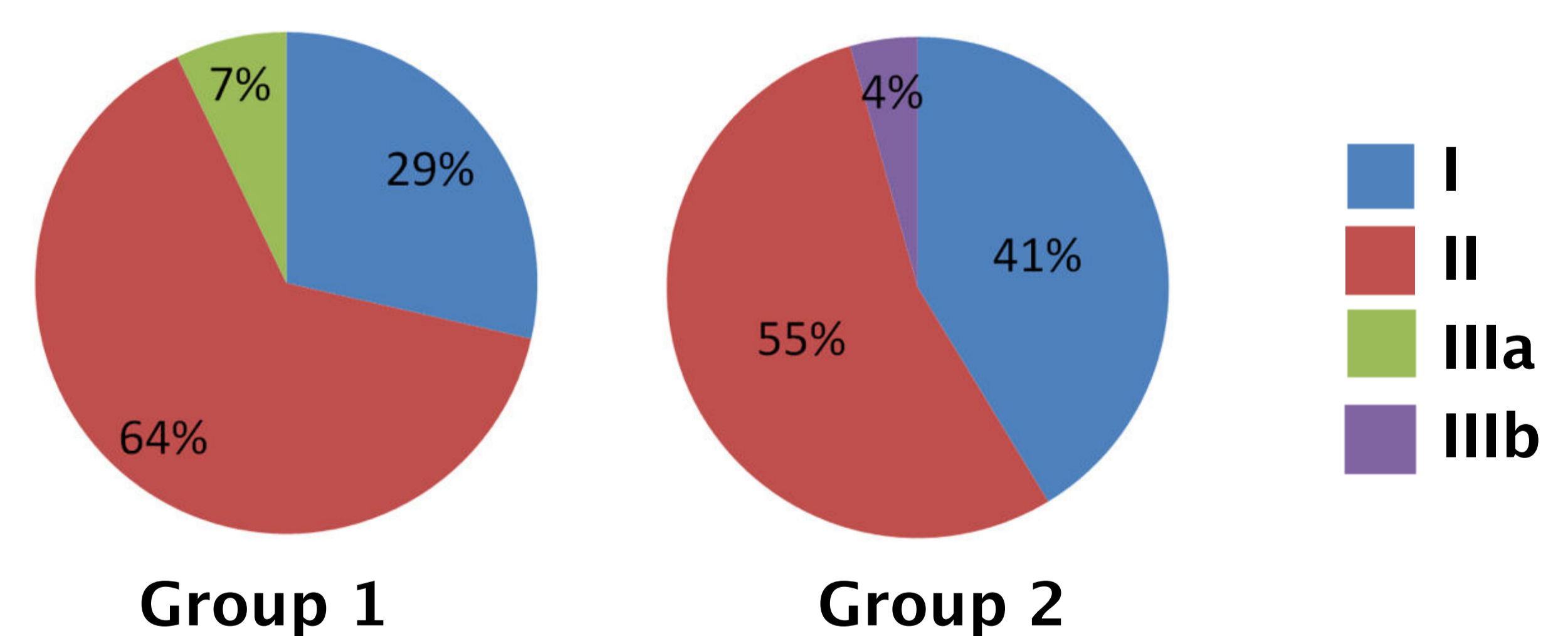
\* Due to disease type

\*\* Due to operation type

### Short-term results

	Group 1	Group 2	p
Hospital stay, days	15.0±1.5	14.6±0.6	0.7
Complications	14 (52%)	46 (48%)	0.72
Ileus	7	22	0.75
Lymphocele	2	0	-
Bleeding	2	0	-
Thrombosis of vein	1	0	-
Lymphorrhea	1	0	-
Periodical disease	1	0	-
Parastomal dermatitis	0	19	-
Anastomosis leak	0	5	-
Bowel peristalsis restoration, days	1.4±0.2	1.7±0.1	0.02
Time to first stool, days	2.9±0.3	2.1±0.1	0.04
Postop. IV infusions, days	9.3±1.0	6.7±0.3	0.01

### Complications by Clavien–Dindo classification



### Approach

	Open	Laparoscopic	p
Complications	39%	55%	0.1
Ileus	22%	25%	0.7
<b>Group 1</b>			
Complications	57%	50%	0.75
Ileus	43%	20%	0.24
Bowel peristalsis restoration, days	2.3±0.4	1.2±0.1	0.001
Time to first stool, days	4.1±0.7	2.5±0.4	0.014
<b>Group 2</b>			
Complications	36%	56%	0.06
Ileus	18%	26%	0.34
Bowel peristalsis restoration, days	1.5±0.1	1.8±0.1	0.05
Time to first stool, days	2.0±0.1	2.2±0.1	0.34

## Conclusion

- Preventive ileostomy patients who underwent total colectomy for IBD may need longer infusion therapy and later stool than preventive ileostomy patients with rectal cancer. This can be related to specific disease pathogenesis.
- Preventive ileostomy patients present similar postoperative period regardless surgery volume.