

# Endoscopy Department

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## “How To Refer?”

### Direct Access:

Health mail or email

[endoscopyappointments@beaconhospital.ie](mailto:endoscopyappointments@beaconhospital.ie)

### Outpatient Appointment:

Health mail or email to

[outpatientsclinic@beaconhospital.ie](mailto:outpatientsclinic@beaconhospital.ie)

## “Why Refer?”

- JAG Accredited Centre
- Direct Access Pathways
- No Waiting Time
- Consultant-Led Service
- Clear Reports
- Excellent Patient Experience & Outcome

# Dilemmas in Colorectal Disease: What to do?

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**Prof Reza Kalbassi**

Consultant in Colorectal and Minimally Invasive Surgery  
Clinical Lead Endoscopy Department  
Associate Clinical Professor, UCD, School of Medicine

# Symptoms of Colorectal Disease

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- Rectal bleeding
- Diarrhoea
- Constipation
- Mucus/discharge
- Faecal/ Flatus urgency and incontinence
- Tenesmus
- Pain
- Weight loss

# Colorectal Disease

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## **Benign conditions:**

### **Anorectal:**

Hemorrhoids, Fissure in ano, Fistula in ano, anal abscess, anal lesions  
Pilonidal sinus

### **Inflammatory Bowel disease:**

Crohn's Colitis, Ulcerative Colitis

### **Diverticular Disease**

### **Pelvic floor disorders:**

Chronic constipation, Faecal Incontinence, Pelvic organ prolapse

## **Neoplastic/Malignant conditions:**

Colon/ rectal cancer, anal cancer

# Investigations

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- Bloods
- Stool tests
- **Colonoscopy \_ Gold Standard**
- CT scans/ MRI scans
- MRI pelvic floor
- Colonic transit study
- Endorectal ultrasound and anal manometry

# Anorectal Dilemmas

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\_ **Hemorrhoids**

\_ **Fissure in ano**

\_ **Rectal Prolapse**

# Case 1

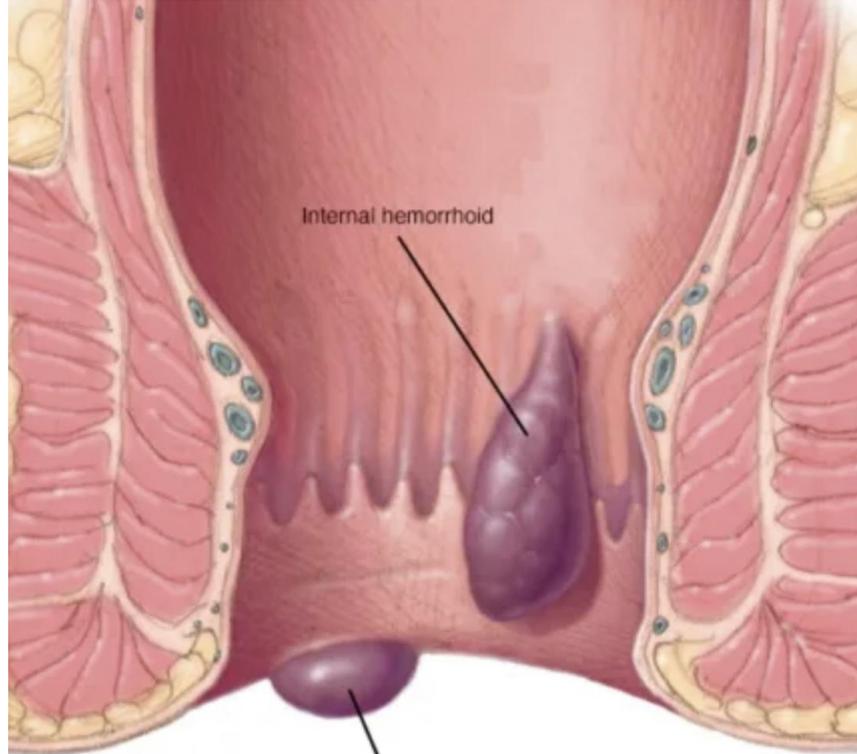
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## 45 years old male

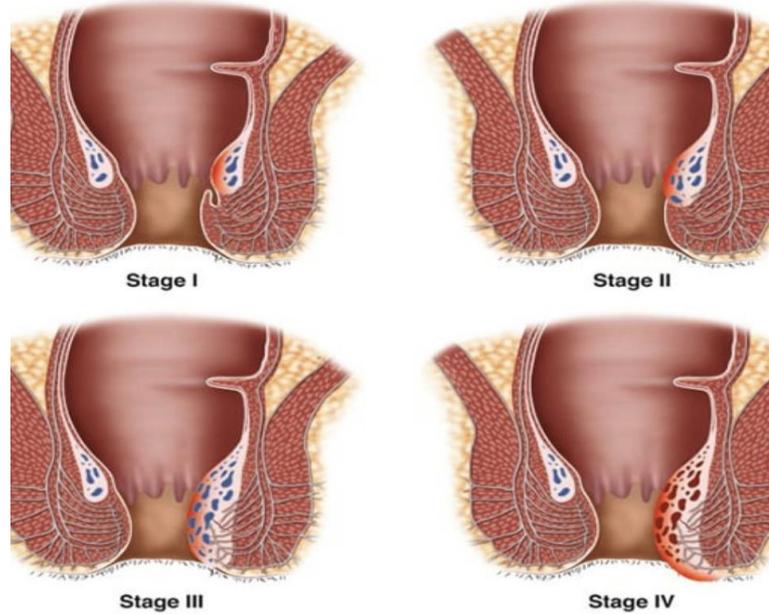
- Constipation for 5 days with straining
- PR bleeding
- Anal pain
- Itchiness
- Tender swelling at anus
- Difficulty sitting

# Hemorrhoids

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## HEMORRHOID GRADING SYSTEM



# Haemorrhoids

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# What to do?

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- Laxatives
- Anal hemorrhoid creams/ ointments, suppositories if tolerated
- Ice packs
- Anti-inflammatory
- Metronidazole ?
- Dietary correction/ lifestyle changes

**Refer to Colorectal Surgeon for opinion/ further treatment + Colonoscopy**

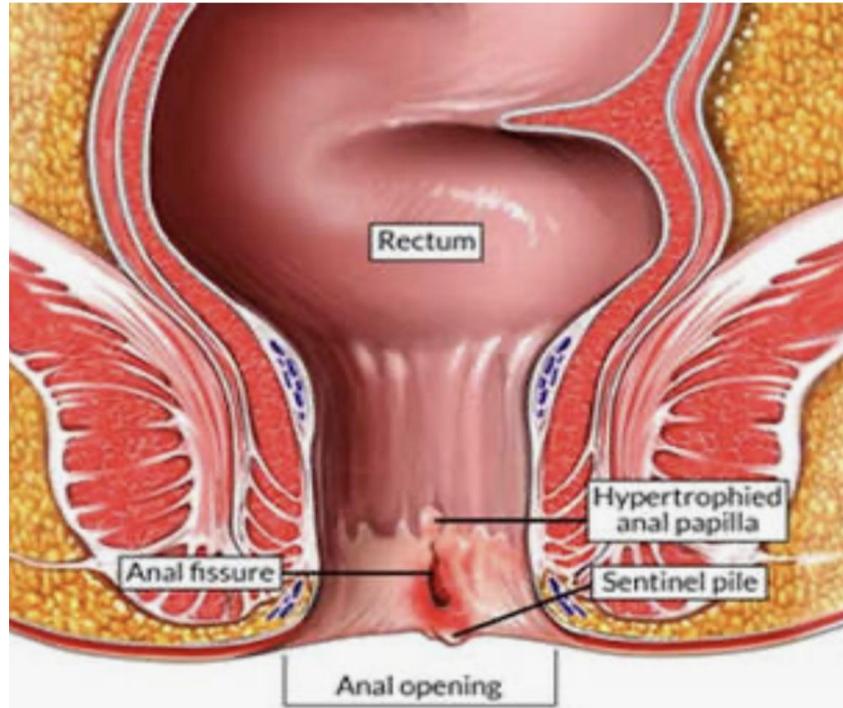
## Case 2

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### 27 years old female

- Constipation for several weeks
- Anal pain and stinging
- Pain worse after defaecation
- Rectal bleeding
- Difficulty sitting

# Fissure in Ano



# What to do?

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- Laxatives
- Local anesthetic gels / cream
- Rectogesic / Diltiazem ointment
- Dietary advice / Lifestyle changes

## **Refer to Colorectal Surgeon for opinion/ further treatment + Colonoscopy/ sigmoidoscopy**

- Examination under anesthetic / Botox injection
- Surgery

# Case 3

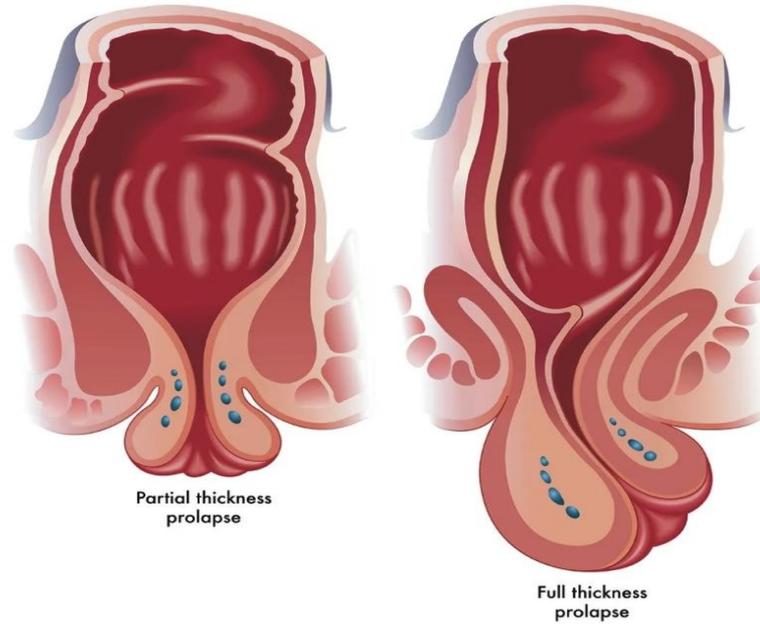
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## 72 years old female

- 3 Children/ 3 normal Vaginal delivery with difficult 1<sup>st</sup>
- Chronic constipation/ difficult evacuation
- Pelvic pressure
- Recent heavy lifting/ gardening
- Felt something drop in pelvis and found swollen tissue outside the rectum
- PR bleed and mucus PR
- Faecal staining
- Urinary urgency

# Rectal prolapse

## Rectal prolapse



# Rectal prolapse

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# Rectal prolapse

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# What to do?

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- Careful and early assessment of pelvic floor symptoms:
  - constipation
  - difficult evacuation
  - Flatus / Faecal incontinence / urgency
- Laxatives if constipation
- Analgesia
- Avoid heavy lifting
- Dietary advice
- Reduce prolapse to reduce swelling and discomfort

## **Early referral to specialist Colorectal Surgeon / pelvic floor centre**

- Careful assessment / Investigations / Pelvic floor MDT approach
- Pelvic floor Physiotherapy / Surgery
- Surgery for Rectal prolapse:
  - Delormes Rectopexy
  - Altemeiers
  - Laparoscopic / Robotic Rectopexy

**Prof. R. Kalbassi**

**Suite 4,  
Beacon Consultants clinic  
Beacon Court  
Sandyford  
Dublin 18/ D18 E7P4**

**Tel: 01-2920565**

**Email: [rkalbassi.sec@beaconhospital.ie](mailto:rkalbassi.sec@beaconhospital.ie)**

**[endoscopyappointments@beaconhospital.ie](mailto:endoscopyappointments@beaconhospital.ie)**