

Case Report

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Novel Description of Nash's Rectal Funnel for Drainage of Pelvic Collections Following Colorectal Surgery

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Background

The use of a Foley catheter or anal stent for the drainage of pelvic collections following colorectal surgery has previously been described [1,2]. The novel technique of using the Nash rectal funnel in patient with a presacral collection following Hartman's procedure is first presented here.

Case Study

A 50yr old gentleman undergoing neoadjuvant chemotherapy for rectal cancer underwent an emergency Hartman's procedure for a stercoral perforated rectosigmoid colon. Post-operatively the patient became persistently pyrexial with rising inflammatory markers. A CT abdomen and pelvis with contrast showed a 6 x 7.5 x 6cm presacral fluid collection (Figure 1).

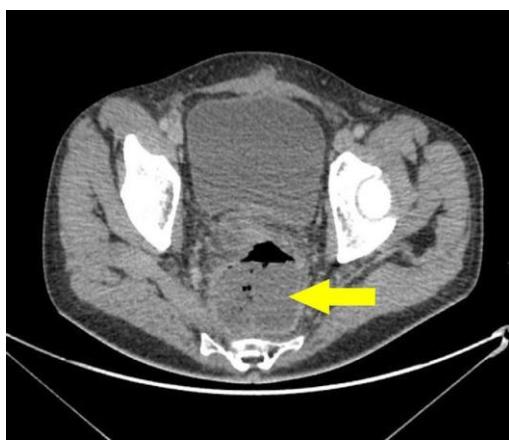


Figure 1: Axial CT image of gas containing pre-sacral collection (arrowed) shown located behind the bladder.

The patient underwent an examination under anaesthetic and attempted drainage of the presacral collection via the blown rectal stump with a large Foley catheter, this unsuccessfully drained

sepsis. The Nash rectal funnel (Figure 2).



Figure 2: The Nash rectal funnel. This hollow tube has a flange at each end to prevent it moving into or out of the anus.

Was then inserted under local anaesthetic with good initial drainage of the collection. Drainage continued for a further 4 days after which the rectal funnel was removed. Repeat imaging confirmed successful resolution of the presacral collection (Figure 3).

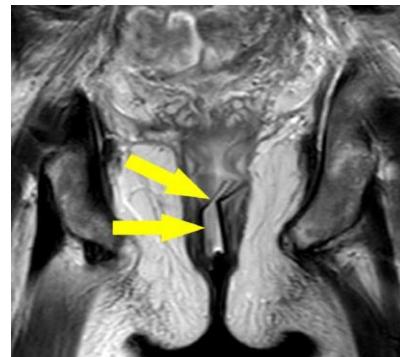


Figure 3: MRI of coronal T2 image of the rectal stent in situ (arrowed).

This avoided further need for surgery.

Technique for Use

The Nash rectal funnel is a soft silastic hollow apparatus which can easily be inserted through the anus to open the blown rectal cross-staples after instillation of local anaesthetic jelly. The rectal funnel can be left in situ until the collection is drained with minimal discomfort to the patient. MR imaging can be used to confirm completion of drainage, after which the rectal funnel can be removed with ease on the ward.

Discussion

Foley catheters are well established as a tool for collection drainage but due to their narrow lumen can become blocked [2]. The rectal funnel was inspired by Bill Heald's anal stent which

originally was designed to protect low rectal anastomoses. It provides an alternative method to the drainage of pelvic collections associated with colorectal surgery, as seen in the above case study. The shorter and wider design of the rectal funnel allows for easier drainage of thicker collection fluid and it avoids both the limitation of mobility that can be caused by a catheter bag and suturing of the catheter to the perineal skin. We have found it to be a cheap, easy and useful; if you have a similar case you can contact us to try the Nash rectal funnel.

References

1. Brent A, Armstrong T, Nash GF, Heald RJ (2007) Therapeutic use of the Heald silastic anal stent. *Colorectal Dis* 9: 279-280.
2. EJ Cook, BJ Moran, RJ Heald, GF Nash (2012) Pelvic collection drain-age by Heald anal stent. *Ann R Coll Surg Engl* 94: 361.