RECTAL ISCHEMIA: A SERIOUS COMPLICATION OF POLIDOCANOL FOAM INJECTION FOR HEMORRHOID DISORDER

Jorge Fonseca

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Colorectal

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A case report describes severe rectal ischemia following polidocanol foam injection for grade IV hemorrhoids in a patient with prior sigmoidectomy, suggesting increased complication risk in patients with previous colorectal surgery.

KEY POINTS

- A 73-year-old male developed abdominal pain, hematochezia, and rectal ischemia hours after the second polidocanol foam injection session for grade IV hemorrhoids
- The patient had prior sigmoidectomy for diverticular disease, which the authors state was essential in the pathogenesis of rectal ischemia due to surgical amputation of the superior rectal artery
- Conservative management with antibiotics failed, requiring 20 sessions of hyperbaric oxygen therapy that achieved complete mucosal healing but resulted in anastomotic stenosis requiring balloon dilation
- The authors report that in their experience polidocanol foam injection reduces bleeding in 98% of patients with grade III and IV hemorrhoids, including those on anticoagulation or antiplatelet therapy
- The case suggests that patients with previous colorectal surgery may experience more frequent complications from polidocanol foam injection

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