



ARNOLD PALMER HOSPITAL
For Children
Supported by Arnold Palmer Medical Center Foundation

Center for Pediatric Digestive Health & Nutrition

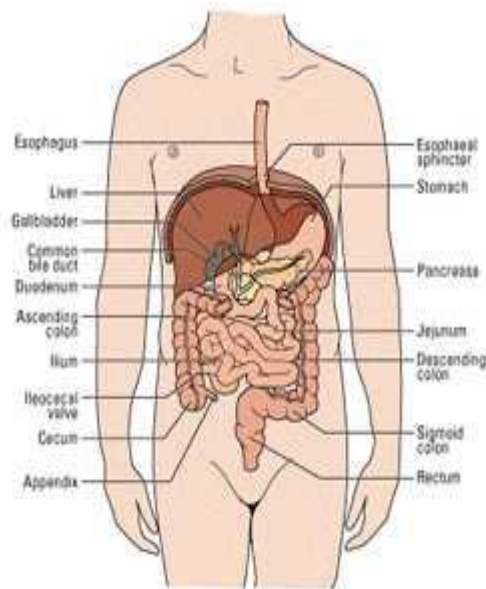
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Percutaneous Cecostomy Tube

A cecostomy is a catheter that is inserted into the cecum, which is the first part of the large bowel and is usually located within the right lower quadrant of the abdomen. The natural passage of food is into the mouth, through the stomach and small intestines into the cecum, then through the rest of the large bowel (ascending, transverse, descending, and sigmoid colon) into the rectum, and out the anus. Since a cecostomy is inserted into this first part of large bowel, patients with fecal incontinence (or their caregiver) can use the cecostomy to administer a small-volume phosphate enema followed by a saline enema to quickly and completely evacuate and cleanse the large intestine, emptying through the anal opening.

In this way, potentially embarrassing accidents are avoided, and the patient often gains greater independence and freedom to pursue activities previously prevented by fear of incontinent episodes. The C-tube remains in the colon and provides a comfortable, convenient way to fully cleanse the bowel with an enema. Emptying the colon in this regular, predictable way can prevent unexpected leakage. After their C-tube insertion, some patients are able to give their own enemas for the first time. All of our patients have described almost complete resolution of their fecal incontinence with few unexpected accidents.

Digestive System



Benefits of a Cecostomy

We have had a tremendous response from our patients and their families, telling us how the cecostomy has changed their lives. They find the antegrade colonic enema cecostomy technique is much more effective than other techniques, significantly improving resolution of incontinence, resulting in fewer accidents and many patients no longer wearing diapers. Our patients have reported increased independence and mobility, and have responded with an increased self-esteem and better grades.

Patients have also mentioned that the Chait Trapdoor™ Cecostomy Catheter:

- is esthetically more appealing
- is more comfortable
- allows increased mobility
- is socially accepted
- gives them the ability to go swimming without hesitation

From a medical perspective, percutaneous cecostomy is an effective alternative for the treatment of fecal incontinence. Most procedures are performed under sedation, and we've experienced no major complications and very few minor complications. Most importantly, patient response and acceptance has been excellent.

Candidates for a Cecostomy

All patients with bowel / fecal incontinence are cecostomy candidates. The children who have benefited from a cecostomy have had diagnoses and abnormalities including:

- spina bifida
- imperforate anus
- myelomeningocele
- cloacal anomalies
- Vater Syndrome
- sacral agenesis
- paraplegia
- Klippel Feil Syndrome

Alternatives to a Cecostomy

Alternative techniques to manage bowel / fecal incontinence involve a combination of:

- diet modification
- laxatives
- manual expression
- disimpaction
- bowel training
- biofeedback
- suppositories
- electrostimulation
- large volume retrograde enemas