



AB036. 123. Surgical implications of de-functioning stomas—an unappreciated surgical issue?

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Background: Surgical implications following closure of de-functioning stomas remains a common surgical problem. Loop ileostomies are now thought to be the preferred surgical option with probable fewer complications to loop colostomy. However, few studies have shown such benefits.

Methods: We reviewed all stomas performed over a 10-year period from a single surgeon dedicated colo-rectal database. This resulted in the formation of a 109 stomas of

which 52 were temporary loop colostomies.

Results: Forty-four of 52 (84.6%) of the temporary stomas were reversed over a period of 2–14 months (mean: 5.1, median: 3). No significant immediate post-operative complications occurred. At follow up over a period of 1 month to 10 years (median: 6 months), 6 of 44 (13.6%) reversed developed symptomatic incisional hernias. Three other stoma patients had incisional hernias seen on follow up CT but were clinically insignificant and asymptomatic.

Conclusions: Temporary loop colostomy is still a safe and effective method of de-functioning the large bowel and is associated with little morbidity and complications. It is also associated with fewer incisional hernias and other complications following closure when compared to closure of loop ileostomies.

Keywords: De-functioning; incisional hernia; stoma

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