

Rectovaginal Fistula

What is a Rectovaginal fistula?

A rectovaginal fistula is a connection from the rectum to the vagina. Patients may experience anything from gas passing from the vagina to colored fluid from the vagina to stool. This is abnormal and requires surgery to correct the problem.

The fistula or connection can be high, which means it connects the apex or most internal portion of the vagina to the intra abdominal portion of the colon or rectum. If this connects to the small bowel, it is called an enterovaginal fistula. This type of fistula causes thin liquid stool to leak from the vagina and may cause skin irritation.

The fistula or connection can be low where it connects from the anus or just above the anus close to the opening of the vagina. This can happen after childbirth with associated episiotomy or tear or with rectocele/pelvic floor surgery.

How is a Rectovaginal Fistula diagnosed?

The diagnosis of rectovaginal fistula starts with a careful history regarding an individual's symptoms, medical problems and a history of physical or emotional trauma that may be contributing to their problem. Next the physician examines the patient to identify any physical abnormality.

A barium enema is a study commonly used to demonstrate a connection from the rectum to the vagina. During this study, the patient is given an enema of a thick liquid that can be detected with x-ray. This study will demonstrate if there is a connection between the two organs.

Vaginoscopy is viewing the vagina in search of the fistula opening. It can be done in a doctor's office or with sedation in the endoscopy suite or operating room. This may be combined with colonoscopy or flexible sigmoidoscopy, which is viewing the rectum and/or the rest of the colon. It would be performed

looking for the source of the fistula.

How is a Rectovaginal Fistula treated?

The fistula usually requires surgery to correct. If the fistula is low, it may be repaired with a procedure done between the patient's legs or through the perineum. This is usually outpatient surgery.

If the fistula is high, then surgery is usually done using an incision on the abdomen. It will require resection of the involved bowel and repair of the vagina. A diverting ileostomy may be necessary to allow proper healing. This is a temporary stoma where the small bowel is brought up to the abdominal wall, so that stool flows into a bag instead of out the anus. Several months later, after the bowel and vagina have healed, the stoma is reversed.

What is a Colorectal Surgeon?

Colon and rectal surgeons are experts in the surgical and non-surgical

treatment of colon and rectal problems. They have completed advanced training in the treatment of these issues in addition to full training in general surgery. Colon and rectal surgeons treat benign and malignant conditions, perform routine screening examinations and surgically treat problems when necessary.

PATIENT INFORMATION

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