

# Sigmoid Colectomy

## What Is A Sigmoid Colectomy?

A sigmoid colectomy is an operation to remove part of the left side of the colon known as the sigmoid colon. This procedure is commonly performed for patients with colon cancer or certain non-cancerous conditions, such as Crohn's disease, diverticular disease, or sometimes as part of surgery for rectal prolapse. In most cases, this operation can be performed using a laparoscopic (keyhole) surgical technique, which allows for faster recovery.

## What Does The Operation Involve?

A sigmoid colectomy can be carried out as an open or laparoscopic (keyhole) procedure. During the surgery:

- The sigmoid colon is removed
- The blood vessels and lymph nodes associated with the affected area are also taken out
- The surgeon creates a new connection (anastomosis) between the remaining left side of the colon and the top of the rectum using either sutures or surgical staples

In most cases, this type of surgery does not require a stoma (ileostomy or colostomy). However, in some situations, a stoma may be necessary. If this applies to you, your surgeon will discuss it in detail before the procedure.

The operation typically takes around two and a half hours. After removal, the bowel segment is sent to the pathology department for examination, with results generally available within two weeks.

## What Are The Risks Of The Surgery?

As with any abdominal operation, there are some risks involved, including:

### General risks:

- **Blood clots (thrombosis):** You will be provided with compression stockings and blood-thinning injections to minimise this risk
- **Bleeding:** This is rare, but if significant blood loss occurs, a blood transfusion may be required

- **Infection:** Wound infections can occur but are usually treatable with antibiotics

### Specific surgical risks:

- **Anastomotic leak:** The join in the bowel may leak, especially in patients with Crohn's disease or those taking steroids. Small leaks may be treated with antibiotics and drainage, while larger leaks may require further surgery and the formation of a stoma (colostomy)
- **Ileus (delayed bowel function):** The bowel may temporarily stop working, leading to bloating and vomiting. This is usually managed with bowel rest, intravenous fluids, and sometimes a nasogastric tube
- **Bowel obstruction:** Scar tissue (adhesions) or a twist in the bowel can cause a blockage. Most cases resolve with bowel rest, but surgery may be needed in some instances
- **Conversion to open surgery:** If a keyhole approach is not feasible, the procedure may need to be completed as an open operation

## Recovery And Aftercare

### In hospital:

- You will have an intravenous drip for fluids, typically removed within 24 hours
- A catheter (to drain the bladder) is generally removed within 24 hours
- An abdominal drain may be used and is usually removed after a few days if necessary
- You will be encouraged to eat and drink as soon as you feel able, usually on the same day
- Early mobilisation is encouraged to promote recovery
- Hospital stay typically lasts 2-5 days for keyhole surgery and 5-7 days for open surgery, though this may vary

### At home:

- You should remain mobile but avoid heavy lifting or strenuous activities for about six weeks

- If external sutures or staples were used, they are typically removed 10-14 days post-surgery
- Most patients can resume driving after two weeks, though recovery time may be longer after open surgery
- It is advisable to eat small, regular meals, avoiding very rich or spicy foods and those high in roughage for the first few weeks

A follow-up consultation is scheduled approximately two weeks after discharge, but you can request an earlier appointment if needed. If you experience severe pain, fever, persistent vomiting, or signs of infection, contact your healthcare provider immediately.

## Why Choose The Midlands Bowel Clinic?

- **Expert colorectal surgical care** with a focus on patient-centred treatment
- **Specialists in minimally invasive keyhole procedures** for faster recovery and reduced discomfort
- **Comprehensive pre-operative assessments** tailored to individual patient needs
- **Personalised aftercare** to support your recovery journey
- **A dedicated multidisciplinary team** providing high-quality care in a professional and comfortable environment

## Contact Us

If you have any questions about sigmoid colectomy or would like to arrange a consultation, please contact the Midlands Bowel Clinic. Our friendly team is here to provide support and guidance at every step of your treatment journey.