

Ventral Rectopexy

What Is Ventral Rectopexy?

Ventral rectopexy is a keyhole (laparoscopic) operation used to treat rectal prolapse, a condition where the rectum slips down and may protrude from the anus. It is also used for patients with symptoms of obstructive defaecation syndrome or an internal prolapse (rectal intussusception), where the rectum folds in on itself.

Patients with faecal incontinence and a rectocele (a bulge in the vaginal wall caused by the rectum) may also benefit from this procedure. The surgery aims to restore the normal position of the rectum, improving bowel function and reducing prolapse symptoms.

What Does The Operation Involve?

In most cases, ventral mesh rectopexy is performed using a laparoscopic (keyhole) technique, which allows for a faster recovery and less post-operative pain.

- The rectum is mobilised (freed) on one side
- A lightweight mesh (polypropylene) is stitched to the front of the rectum
- The mesh is then secured to the sacrum (bone at the back of the pelvis) using special tacks
- This pulls the rectum back into its correct position, preventing it from prolapsing downwards
- The procedure is performed using 3 or 4 small incisions, no larger than 1cm

In some cases, a keyhole approach may not be possible, and an open operation may be required. Your surgeon will discuss this with you before surgery.

What Are The Risks?

Like all surgeries, ventral rectopexy carries some risks. However, it is a safe and well-established procedure.

- **Bleeding is very rare**, and wound infections are uncommon
- **Conversion to open surgery** – Sometimes, keyhole surgery is not possible, and the surgeon may need to make a larger cut to complete the operation

- **Persistent symptoms** – While the surgery corrects the prolapse, it may not completely resolve bowel symptoms
- **Mesh complications** – Rarely, the mesh can erode into the bowel, which may require further treatment or removal

Your surgeon will discuss these risks with you before the procedure.

What Happens After The Operation?

Recovery after ventral rectopexy is usually smooth and quick, especially with the keyhole approach.

- A drip is usually in place for 24 hours to keep you hydrated
- You can eat and drink as soon as you feel able, usually on the same day
- A catheter (bladder tube) is placed during surgery and is normally removed the next day
- Hospital stay is usually 2-5 days, depending on your recovery
- You will be prescribed stool softeners for 4-6 weeks to prevent straining
- You are encouraged to stay mobile but should avoid heavy lifting and strenuous activity for at least 6 weeks
- Most patients can resume driving after about 2 weeks, but this may vary, especially if the procedure was performed as an open surgery

Your surgeon will arrange a follow-up appointment to monitor your recovery and discuss any concerns.

Why Choose The Midlands Bowel Clinic?

- **Specialist colorectal surgeons** with extensive experience in treating rectal prolapse
- **Advanced keyhole surgery** to reduce recovery time and discomfort

- **Personalised treatment plans** tailored to your symptoms and needs
- **Comprehensive post-operative support** to ensure a smooth recovery

Contact Us

If you have rectal prolapse or related symptoms and would like to discuss your treatment options, contact the Midlands Bowel Clinic today. Our team is here to provide expert care and support.