

**KARYA ILMIAH:  
SEMINAR INTERNASIONAL**

*Total Colonic Aganglionosis*

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**KEMENTERIAN PENDIDIKAN DAN KEBUDAYAAN**

**UNIVERSITAS JEMBER**

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Karya Ilmiah Dipresentasikan dalam Seminar Internasional

:International Colorectal Web Meeting July 25, 2019 W. H. Hendren

Foundation for Pediatric Surgery & Urology in collaboration with

American Pediatric surgical association & Society for Pediatric Urology

# International Colorectal Web Meeting: July 2019

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## Patient Cases

**Video Summary of Cases Presented** (</case/video-summary-international-colorectal-web-meeting-july-2019>)

**Case 1. Conjoined Twins** (<https://www.hendrenproject.org/node/1806>)

Rogelio Dominguez, M.D., and Luzia Toselli, M.D., *Urinary and Fetal Incontinence for Children, Fundacion Hospitalaria, Salud Materno Infanto Juvenil, Buenos Aires, Argentina*

**Case 2. One-Year-Old Male Patient with Past History of Colonic Atresia** (<https://www.hendrenproject.org/node/1807>)

Karla Santos, M.D., *National Institute of Pediatrics, Mexico City, Mexico*

**Case 3. Three-Year-Old Male Patient with Hirschsprung s/p Pullthrough, Unable To Stool Spontaneously**

(<https://www.hendrenproject.org/node/1808>)

Andrew Trecartin, M.D., *International Center for Colorectal and Urogenital Care, Childrens Hospital Colorado, Aurora, CO*

**Case 4. Total Colonic Aganglionosis**

(<https://www.hendrenproject.org/node/1809>)

Supangat, M.D., and Gilang Vigorous, M.D., *Dr. Soebandi General*

## Related Links

About the International Colorectal Web Meetings (</node/1296>)

Submit a Patient Case (</node/1470>)

How To Attend the Web Meetings (</node/1287>)

Recent Web Meetings (</node/1543>)

Future Web Meetings (</node/1384>)

Hospital, Faculty of Medicine, University of Jember, East Java, Indonesia

THP Colorectal  
Surgery Center  
(/node/1054)

**Case 5. Nine-Month-Old Female Patient Born with a Cloaca**  
(<https://www.hendrenproject.org/node/1810>)

Andrea Bischoff, M.D., *International Center for Colorectal and Urogenital Care, Children's Hospital Colorado, Aurora, CO USA*

**Case 6. Seven-Month-Old Female Patient Born with a Cloaca**  
(<https://www.hendrenproject.org/node/1811>)

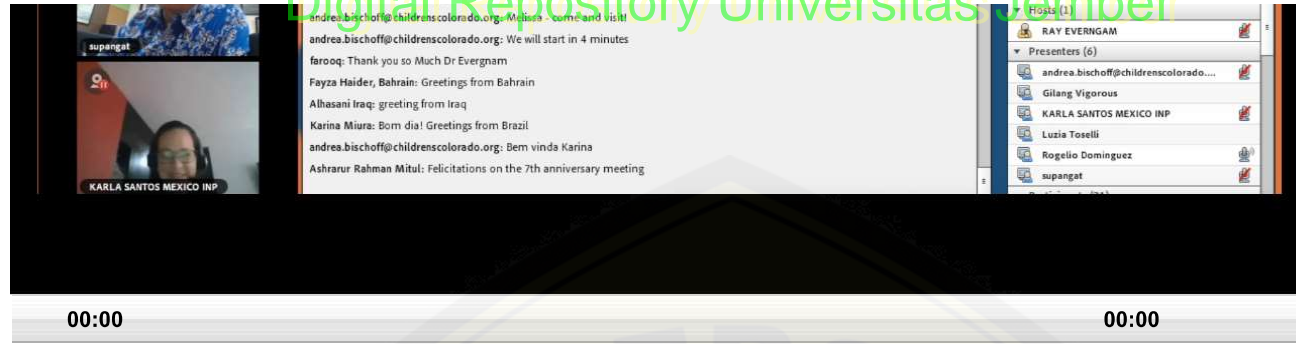
Andrea Bischoff, M.D., *International Center for Colorectal and Urogenital Care, Children's Hospital Colorado, Aurora, CO USA*

**Watch an *Interactive Video* of the July 2019 International Colorectal Web Meeting Organized by Slides**

(<https://https://hendrenproject.adobeconnect.com/pw46p0aj39c9/>)

## Patient Case Video

The screenshot shows a video conference interface. On the left, there is a 'Presenters' panel with four video thumbnails. The top thumbnail shows three people, with the name 'andrea.bischoff@childrenscolor...' below it. The second thumbnail shows a man with the name 'Giang Vigorous'. The third thumbnail shows a man with the name 'Rogelio Dominguez'. The fourth thumbnail shows a man with the name 'Rogelio Dominguez'. The main area of the screen displays a presentation slide titled 'Conjoined Twins'. The slide lists 'Dr. Rogelio Domínguez' as 'Urinary and Fecal Incontinence for Children' and 'Dra. Luzia Toselli' as 'Fetal Medicine'. At the bottom of the slide is the logo for 'Fundación Hospitalaria' and an image of a hand holding a child. Below the slide, there is a 'Comments & Questions' panel with the text 'Dr SARRA AGGOUN: sorry, we can't hear you'. On the right side, there is an 'Attendees' panel with the name 'Rogelio Dominguez'.



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# Total Colonic Aganglionosis

Supangat, M.D.

Gilang Vigorous, M.D.

Dr. Soebandi General Hospital, Faculty of Medicine, University of Jember, East Java, Indonesia

- 3-mo-old male infant presents with **abdominal distension** (/tags/abdominal-distension) and **delayed passage of meconium**. (/tags/meconium)
- He had **previously been prescribed laxatives**.
- **Ileostomy** (<http://tags/ileostomy>) was performed following presentation with biopsies that **identified total colonic aganglionosis** (/tags/colonic-aganglionosis).
- At 2-yr-old, he presented for follow up. He has been growing well and his stool is more solid.

## Takeaways

- In cases of total colonic aganglionosis, a diverting ileostomy should be performed. If certain that the biopsies show total colonic aganglionosis, a total colectomy with Hartman pouch can be performed. Once the patient is toilet trained for urine and the family demonstrates that the patient will accept rectal irrigations, the patient would be a candidate for ileo-anal pull-through.

## Related Links

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- The anal canal must be intact for a patient to have bowel control s/p ileoanal pull-through.
- Patients with total colonic aganglionosis have a high incidence of enterocolitis. For that reason, it is necessary to ensure that the patient would accept rectal irrigations prior to closing the ileostomy.
- Patient's with total colonic aganglionosis s/p ileoanal pull-through are still at risk for enterocolitis and require long term follow up.
- *Use of Kimura or Lester Martin approaches are no longer recommended.*
- Ileo-anal pull-through with preserved anal canal is recommended at an age where the child is continent of urine and can verbalize that he or she needs to pass stool.
- Re-biopsy may be indicated depending upon the initial biopsy sites for diagnosis of total colonic aganglionosis.

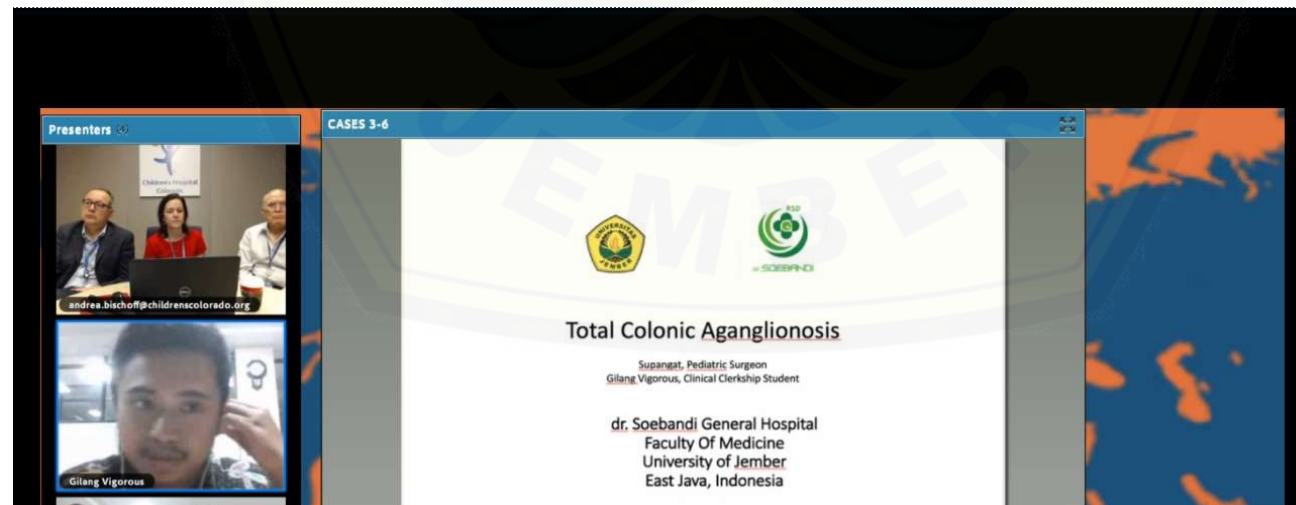
THP Colorectal  
Surgery Center  
(/node/1054)

### Summary Slides:

Total Colonic Aganglionosis

([https://www.hendrenproject.org/sites/default/files/Case4\\_Indonesia\\_TCA.pdf](https://www.hendrenproject.org/sites/default/files/Case4_Indonesia_TCA.pdf))

### Patient Case Video



The screenshot shows a Zoom meeting interface. On the left, there are two video thumbnails: the top one shows a man in a blue patterned shirt, and the bottom one shows a woman with glasses. The main area is a chat window titled 'Comments & Questions' with the following text:

Nelson Rosen: being 'open' doesn't apply to the anal part. that's always open regardless of how one mobilizes from above. (07/25/2019 10:32)

farooq: great... v informative (07/25/2019 10:35)

supangat: dentate line intact in the second surgery?

Nelson Rosen: wonderful outcome but let's hear back when he's trying to get out of diapers. I think the number of children with Hirschsprung's who need bowel management is underestimated. (07/25/2019 10:37)

Nelson Rosen: the plane around the cuff is virgin. I still approach the pelvic part of such re-dos laparoscopically because I like the visibility. (07/25/2019 10:37)

Nelson Rosen: true (07/25/2019 10:40)

Nelson Rosen: true words of wisdom, Jefe!

On the right, there is an 'Attendees' list with 40 participants. The list includes: Gilang Vigorous, RAY EVERNGAM, and Presenters (6): andrea.bischoff@childrenscolorado..., Gilang Vigorous, KARLA SANTOS MEXICO INP, Luzia Toselli, Rogelio Dominguez, and supangat.

At the bottom of the Zoom window, there are two '00:00' timers.

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### THP Source:

International Colorectal Web Meetings (/webinar/international-colorectal-web-meetings)

### Key Words:

Male Patient (/tags/male-patient)  
 Colonic Aganglionosis (/tags/colonic-aganglionosis)  
 Abdominal Distension (/tags/abdominal-distension-0)  
 Surgical Approaches (/tags/surgical-approaches)

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# Certificate of Presentation

W. H. Hendren Education Foundation for  
Pediatric Surgery & Urology

hereby certifies that

**Supangat, M.D., M.Sc., Ph.D., *Pediatric Surgeon***  
**Gilang Vigorous, *Practitioner***

*Dr. Soebandi General Hospital, Faculty of Medicine, University of Jember, East Java, Indonesia*

presented the following patient case:

***Total Colonic Aganglionosis***

during the

**International Colorectal Web Meeting**

*July 25, 2019*



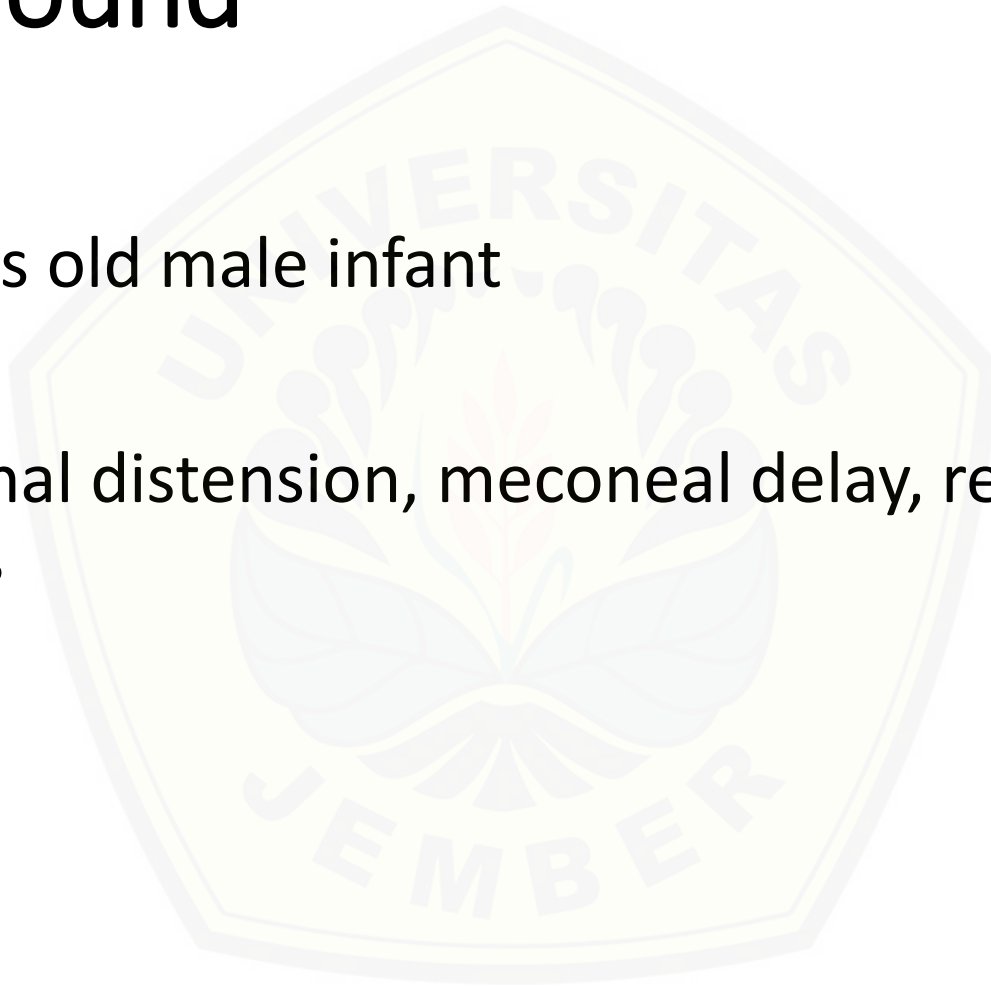
# Total Colonic Aganglionosis

Supangat, Pediatric Surgeon  
Gilang Vigorous, Clinical Clerkship Student

dr. Soebandi General Hospital  
Faculty Of Medicine  
University of Jember  
East Java, Indonesia

# Background

- 3 months old male infant
- Abdominal distension, meconal delay, repeated laxatives





- First surgery : Small ascending colon, ileostomy, aganglion → total colonic aganglionosis
- 2 years old : ideal weight, more solidified stool



## Discussion

- Which one do you suggest?  
pull-trough or permanent ileostomy
- What should we be aware of following each options?



**Thank You**