

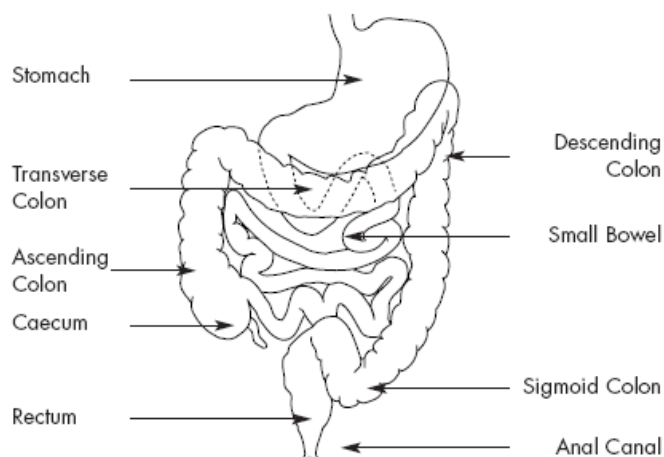
General Surgery

APR – Abdomino-perineal excision of the rectum and anal canal

This operation involves having a general anaesthetic and usually takes approximately four hours. You will need to be in hospital for about seven to ten days. This operation is carried out for cancers or polyps in the lower part of the rectum and anal canal. The lower sigmoid colon, rectum and the anal canal are all removed. This is the part of the bowel that controls when you go to the toilet, so without them you would be incontinent. So that this does not happen your surgeon will form a stoma - called a colostomy - bringing the end of your bowel out onto the surface of your abdomen where it is stitched to the skin makes the colostomy.

The surgeon will sew up the gap that has been created (where your back passage was) and the wound will be left to heal up.

Before you come into hospital you will need to have a low residue (low fibre) diet for two days before surgery. You will be given more information about this. On the day of surgery you will be given an enema to clean your bowel and back passage.



Patient Information

After the operation

When you wake up after the operation you will have a number of tubes attached to you, all of which will be temporary:

- A drip (intravenous fluids) will be in your arm via a small tube called a cannula– this allows fluid to be given to you continuously
- Another cannula may be used to slowly release medication that will ease any pain from a device called a PCA (Patient controlled analgesia). Alternatively you may have an epidural (pain relief which is via a fine tube in your back).
- A flexible tube called a catheter will be in place into your bladder – this will drain your urine away into a bag
- A drainage tube may be in your abdomen – occasionally the surgeon performing your operation may feel it is necessary to insert a drain near to the wound, this enables wounds to heal quickly and cleanly
- A tube into your stomach via your nose is sometimes required to alleviate nausea

As you recover, the ward nurses will remove these tubes within a few days of the operation.

Complications of surgery

The APR operation carries a small risk of damage to a nerve that is in your pelvic area. If this nerve is damaged it may affect both urinary and sexual function. Please discuss the risks of surgery with your surgeon who will be able to give you specific information about your individual risk.

After any major surgery, there is a risk of chest infection, wound infection and thrombosis (blood clots). Whilst you are in hospital the ward staff will take steps to reduce the risks of this happening to you.

Chest infection

You can help reduce the risk of infection developing by practising deep breathing exercises and following the instructions given by the physiotherapist.

Patient Information

Wound infection

The risk of this is increased with bowel surgery. Antibiotics will be given to you through the drip to help prevent this. You can help by eating a diet rich in protein and vitamins as soon as you are able to.

Thrombosis

This is due to changes in the circulation during and after surgery. A small dose of a blood thinning drug will be injected daily into your abdomen. These injections will continue for 28 days following your surgery, so you will be taught to do this yourself and continue with them at home. You can help by moving around as much as you are able and by exercising your legs whilst in the chair or in bed. You will also be given some support stockings to wear for the duration of your stay in hospital.

Your surgeon will discuss all risks of surgery with you before you are admitted to hospital.

Diet and nutrition

Most people who have had bowel surgery are concerned about what they will be allowed or able to eat after the operation.

Your surgeon will tell you when it is all right to start eating again. In most cases it will be quite soon after your operation. When you are able to eat, you will start on a light diet, but soon will be able to eat whatever you feel like and you are encouraged to return to a normal diet.

It is important to try and put the weight back on that you may have lost during your illness. In order for healing on both the inside and outside of your body to take place, the nutrients and vitamins from your food are required.

Whilst you are in hospital the ward staff can arrange for you to see a dietitian. Please ask if you think this would be useful.

Your Colorectal Clinical Nurse Specialist (CNS) will provide you with specific information about your diet with regard to your colostomy.

Patient Information

Stoma care – colostomy

The Colorectal Clinical Nurse Specialist (CNS) will teach you how to look after the stoma. The nurse will begin teaching you when you are feeling better and able to concentrate, this is usually within a few days of surgery. Whilst you are learning the ward staff will also support and assist you in how to care for the stoma.

There is more information available in the booklet that is specifically about colostomy care.

For further information:

Colorectal Clinical Nurse Specialists

Abby Barnwell, Sarah Taylor 024 7696 5617

Helen Taylor 024 7696 5616

Katrina Turner, Sarah Thompson 024 7696 5825

Claire Jackson, Debbie Mulhern, 024 7696 5753
Caroline Ling

Please note that there are other patient information leaflets that you may find useful such as:

- Going home following colorectal surgery
- Enhanced recovery programme

Local services

Age UK Coventry Age UK Warwickshire		024 7623 1999 01926 458100
Bowel Screening Unit		01788 545166/667737
Cancer Information Centre	Main Entrance	024 7696 6052

Patient Information

	UHCW	
Health Information Centre	Main Entrance UHCW	024 7696 6051
Coventry Macmillan Care Team	Hospital Community	024 7696 5498 024 7623 7001
Rugby Macmillan Care Team.	Community	01788 555119
GUT (Cancer Support Group for Coventry & Warwickshire)		024 7696 6475
Hospital Chaplaincy	Hospital	024 7696 7515
Bowel Clinical Trials Nurse	Hospital	024 7696 7151
Specialist Genetic Nurse	Hospital	024 7696 4000
Surgical Counselling Service	Hospital	024 7696 6188
Oncology Counselling Service	Hospital	024 7696 7290
Complimentary Therapies	Hospital	024 7696 7290
Psychosexual Therapy	Hospital	024 7696 7290
Citizens Advice Bureau	Coventry Rugby	024 7625 2050 (appointment only) 0844 855 2322
Coventry Carers Centre	Support for carers	024 7663 2972
Guideposts Trust	Support for carers	024 7638 5888

Also available at University Hospital:

Physiotherapy, Occupational Therapy, Dietitian Service, Social Services

National contact numbers

Association of Coloproctology for Great Britain and Ireland	http://www.acpgbi.org.uk/
Beating Bowel Cancer	020 8892 5256 0845 0719 301 (Helpline) www.beatingbowelcancer.org
Benefit Enquiry Line	Freephone 0800 882200
National Cancer Institute (American)	www.cancer.gov
Bowel Cancer UK	020 7381 9711
Colostomy Association	0800 328 4257 www.colostomyassociation.org.uk/
CORE (The Digestive Disorders Foundation)	020 7486 0341 www.corecharity.org.uk
The Ileostomy & Internal Pouch Support Group (IA)	0800 018 4724 www.the-ia.org.uk
Macmillan Cancer Support	0808 808 0000 www.macmillan.org.uk
Marie Curie Cancer Care	0800 716 146 www.mariecurie.org.uk

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 5617 and we will do our best to meet your needs.

The Trust operates a smoke free policy.

Document History

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