

Rafaelo treatment after longo procedure – a case report

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Introduction

Radiofrequency treatment (Rafaelo) is a minimal invasive treatment with excellent results in prolapsing hemorrhoids.

Hemorrhoid symptoms like itching, soiling, bleeding, and pain are significantly reduced using this method. The outcome of treatment remains stable over time and only a low percentage of patients needs additional medical support.

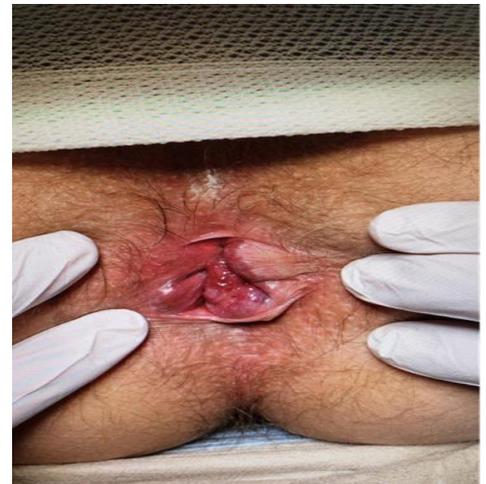
Beside the significant reduction of hemorrhoid symptoms, low post-interventional pain is superior to normal hemorrhoid surgery. Moreover, the Rafaelo procedure is mostly conducted on an outpatient basis under local anesthesia.

In our initial series, we excluded patients that underwent stapler hemorrhoidectomy prior to Rafaelo treatment. We postulated that the metal staples could be overheated by the radiofrequency, resulting in a thermal damage of the surrounding tissue (rectal muscle/mucosa, prostate, vaginal back wall). Encouraged by the exceptionally low complication rate in our initial series, especially no evidence of tissue damage except necrosis of the hemorrhoids, we initiated radiofrequency treatment after stapler hemorrhoidectomy in recurrent hemorrhoidal disease.

Case report

A male patient initially presented a circular anal prolapse in 2013 and was operated on using a circular stapler (33mm) according to Longo procedure.

The postoperative course was complicated due to an anastomotic stenosis, which was treated by a single stepwise anal dilatation. Three years later the patient revisited the proctological practice with symptoms of anal bleeding and prolapsing tissue out of the anus. Image -based analysis presented recurrent prolapsing hemorrhoids at 6-7 and 10-11 o'clock in lithotomy position.



(similar case picture: 2 x Grade III at 5 and 7 o'clock before Rafaelo)
Not related to text/as an example

In both positions radiofrequency therapy was applied. The post-interventional course was uneventful. Three and a half years later the patient does not show specific symptoms of hemorrhoidal disease.

Encouraged by this case with recurrent hemorrhoids after staplerhemorrhoidopexie we've successfully treated three more patients after Longo's procedure using radiofrequency.



(same Case picture 1 after Rafaelo/ rare hematoma formation/ no prolapse and no pain)

Discussion

Recurrence rates after longo procedure are high (up to 42% after 2 years). Previously, the recurrent hemorrhoidal tissue and their resulting symptoms were managed by a redo- staplerhemorrhoidectomy or surgical excision; both procedures are accompanied by postoperative complications like bleeding, pain, anal incontinence, or other functional disorders.

In our experience, Rafaelo therapy after stapler hemorrhoidectomy was a minimal invasive saving procedure with excellent long-term results.

Optimal results can be achieved, if the recurrent prolapse is not complete. As described above, recurrent hemorrhoidal tissue was treated efficiently at two positions.

Particularly noteworthy in this context is that no clinical signs of excessive overheating of the redundant staples occurred.

We conclude that radiofrequency therapy (Rafaelo) in hemorrhoids after stapler hemorrhoidectomy is safe and efficient.



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Source : Enddarmpraxis Köln/ Dr. H.Schäfer and C.Vivaldi
In collaboration with F care Systems NV, manufacturer of Rafaelo products.