

Meeting abstract

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## Stapled haemorrhoidopexy (PPH, longo technique) in the elderly

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### Aim

Compare two groups of patients,  $\geq 70$  years old and  $< 70$  years old, diagnosed with III–IV grade haemorrhoids that underwent stapled haemorrhoidopexy.

### Materials and methods

Between May 2001 and September 2008, 273 patients underwent stapled haemorrhoidopexy (PPH Ethicon-EndoSurgery®). The database has been ordered in two groups: the first composed of 29 patients (10.6%) aged  $\geq 70$ , while the second composed of 244 patients aged  $< 70$ . The preferred type of anaesthesia was spinal with sedation (90.8%), associated with elastomeric pump of NSAIDs during the first 24 hours. The two groups were compared in order to verify their homogeneity: no significant differences were found neither in the distribution of the grade of the disease, nor in the spectrum of symptoms ( $P \gg 0.05$ ). Because of the comorbidity in the elderly, the stratification of the ASA risk was different ( $P < 0.0001$ ).

### Results

The procedure was performed in day surgery, with an average length of stay of 1 day, in the 75% of the patients of the first group and in the 92% of the second group; the analysis of the surgical performance of this technique, regarding the timing and the use of haemostatic stitches, showed no significant differences between the two groups ( $P \gg 0.05$ ). Early haemorrhagic post-operative complications were 6/273, all of them occurred in the second

group and 5/6 (83.3%) required surgical review. Late haemorrhagic complications were 9/273, of which 1 occurred in the first group; the management of the late haemorrhages required surgical review in the 44.5%, and blood transfusion in the 30%. During the first post-operative week occurred several cases of significant anal pain, tenesmus, faecal urgency and two cases of haemorrhoidal thrombosis. During the follow-up, lasted on average for 3.6 years, we observed 3 relapses (10.3%) among the first group and 21 relapses (8.6%) among the second. 18 patients of the first group (62%) and 124 of the second (50.8%) remained totally disease-free.

### Conclusion

Haemorrhoidal disease, although tending to relapse among susceptible patients, can be effectively treated with stapled haemorrhoidopexy (PPH). Thanks to a several years' follow-up, our experience shows an assessment of the long-term results of this technique, focusing particularly on the comparison between the results in the elderly and in younger patients. Longo technique is usually well tolerated by all the patients, even though not totally pain-free in the early post-operative follow-up (first week). This procedure can be performed safely in the elderly as well as in the younger patients with equivalent results.