INTRODUCTION

GORE® BIO-A® Tissue Reinforcement, a 3D scaffold for tissue generation and healing, consists of biocompatible synthetic polymers that are gradually absorbed by the recipient. A possible indication is the suture line reinforcement in case of pelvic floor defects. The objective of this pilot study was to evaluate GORE® BIO-A® Tissue Reinforcement in patients with complicated, laparoscopic-assisted abdominoperineal resection (Miles’ resection) for lower rectal or anal cancer.

METHODS

Gender (m : f) 3 : 4
Age (years) 55 (range 39-74)
ASA score (points) 2 (range 1-3)
ut4-adenocarcinoma, lower rectum 3 (100% neoadj. RCTx)
ut4-squamous cell carcinoma, anal canal 4 (50% neoadj. RCTx; 50% HIV+)

RESULTS

The prosthesis was easy to configure and implant. Patients with primary skin closure as well as secondary wound healing of the perineum finally revealed a pleasant clinical course. In 2 cases of wound infection, the GORE® BIO-A® Tissue Reinforcement allowed for local treatment and infection resolution without prosthetic removal. Three months after surgery, all physical and mental SF-36 values were significantly lower than the norm values for the age-stratified German norm population, most likely because of the postoperative chemotherapy according to the protocol.

CONCLUSION

GORE® BIO-A® Tissue Reinforcement has proven to serve as a convincing tissue scaffold targeting suture line reinforcement in cases of complicated pelvic floor defects after laparoscopic-assisted abdominoperineal resection (Miles’ resection).