Antegrade Colonic Enema (ACE) Surgery

Constipation or fecal incontinence are reasons people have the Antegrade Colonic Enema or ACE procedure. Sometimes this procedure is done if there are functioning problems or nerve problems with the anus or rectum. ACE surgery is a procedure that helps empty the bowel of stool. A small opening (stoma) is made on the abdomen and fluid is put directly into the bowel with a plastic tube (catheter). It is similar to an enema but instead of going into the rectum, fluid is put higher in the bowel.

ACE surgery is used when other methods do not work for constipation or incontinence. Other methods to control these problems could be bowel training, dietary changes or medications like suppositories or enemas.

The surgery is done by making a small incision on the abdomen skin (laparoscopy) to make a stoma (opening) and a small passage from the skin to the large intestine. The passageway is sometime made from the appendix or bowel. Your surgeon will discuss this with you how he/she will do your surgery.

For a month after the surgery a small plastic catheter will remain in place. The catheter will need to be flushed daily with tap water or another fluid to make sure the tube does not get plugged. Your nurse will give you further instruction on how to flush this.

Once the opening is in the abdomen, this stoma can be used daily or every other day to put in an enema-like solution for a process called irrigation.

Irrigation:

- Is putting fluid into the stoma to go to the large intestines to help with stool evacuation.
- Irrigation takes between 30 minutes to 60 minutes.
- Should be done at the same time each day.
- Best time may be 30 minutes after a meal.

ACE does not work for everyone. If you continue to have leaking stool, soling between irrigations or if you are still constipated then you need to discuss this with the surgeon. If the stoma or skin around the opening on the abdomen closes you need to let your surgeon know. It will close if not used regularly.