Ileal pouch-vaginal fistula: treatment with the new Surgisis® Biodesign™ fistula plug

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Ileal pouch-vaginal fistulation is an uncommon complication and occurs in approximately 1 in 20 female patients after an ileal pouch-anal anastomosis. They are a cause of significant morbidity and pouch failure, and their optimal management has not been established. In recent times, bioprosthetic collagen plugs have been increasingly used for the management of anal and pouch-vaginal fistulae, however, the dislodgement of the plug remains the most common cause of plug failure. Here, we demonstrate the use of the new Surgisis® Biodesign™ recto-vaginal fistula plug (“button fistula plug”; Cook Medical Incorporated, Bloomington, IN, USA) for the management of pouch-vaginal fistulae. Of seven consecutive patients treated in our unit, four patients were successfully treated and remained cured, with a median follow-up of 1 year (Figs. 1, 2, 3, 4, 5, 6, 7).

Fig. 1 The Surgisis® Biodesign™ recto-vaginal fistula plug (“button fistula plug”)

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Fig. 2 Patient placed in prone jack-knife position

Fig. 5 Plug is passed into the fistula track, with the button lying at the anal opening

Fig. 3 Identification of primary tract using a fistula probe (exiting through vaginal opening; arrowhead)

Fig. 6 Plug is secured with sutures at both ends

Fig. 4 Anchoring the plug to the fistula probe by means of a suture

Fig. 7 Local anesthetic is delivered