



The D-ileoanal pouch: a new construction ?

R. J. Nicholls^{1,2} · Roberto Zinicola³ 

Received: 17 February 2022 / Accepted: 24 February 2022 / Published online: 10 March 2022
© Springer Nature Switzerland AG 2022

Dear Sir,

The modification of the J-pouch, referred to as the so-called D-pouch in the article by Zhang et al., is not a new reconstruction [1]. The idea of avoiding the “dog-ear” was applied to the manual formation of the J-pouch by the simple manoeuvre of bringing the terminal ileum end-to-side into the proximal ileal segment as shown in the Fig. 1 [2].

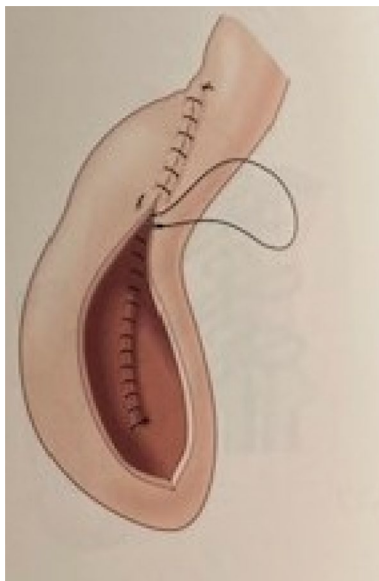


Fig. 1 Manual J-pouch showing the end-to-side incorporation of the terminal ileum into the proximal limb of the pouch to avoid a “dog-ear” deformity

This was never given a new name as it was the obvious way to construct the J-pouch once it had become clear that an end ileal stump could leak and should therefore be avoided. The technique described by Zhang et al. achieves the same for a stapled pouch. Rather than giving it a new name, would it not be simpler to continue to use the term ‘J-pouch’ but adding a phrase such as *without “dog-ear”*? This is more likely to be generally adopted, as it would be readily understood by surgeons to be a familiar technique with a refinement. For any surgeon intending to create a manual J-pouch, the technique shown in the figure is strongly recommended; it is easy to construct and results in no “dog-ear”.

References

1. Zhang Y, Hu H, Jiang C, Qian Q, Ding Z (2021) D-pouch: a modified ileal J-pouch for patients with ulcerative colitis and familial adenomatous polyposis. *Tech Coloproctol* 25(11):1209–1215
2. Nicholls RJ, Tekkis PP (2015) Restorative proctocolectomy with ileal reservoir. In: O’Connell PR, Soloman MJ (eds) *Operative surgery of the colon, rectum and anus*, chapter 6.9, 6th edn. CRC, Boca Raton, pp 541–561

Publisher’s Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

✉ Roberto Zinicola
rzmediterraneo@gmail.com

¹ Colorectal Surgery, Imperial College, London, UK

² Emeritus Consultant Surgeon, St Mark’s Hospital, Harrow, UK

³ General Surgery Unit, University Hospital, Parma, Italy