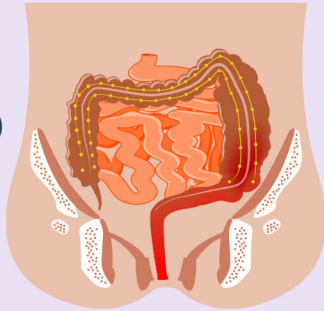


Effect of Age on Surgical Outcomes in Hirschsprung Disease Resection Surgery

Optimal age for resection of the affected bowel in Hirschsprung disease (HD) remains unknown



Does age at resection determine the surgical outcomes?

Cross-sectional study to assess medical records (1957–2015) of patients with HD in the Netherlands

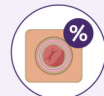
Data analyzed to measure



Mortality



Postoperative complications



Ostomy rate



Redo surgery rate

Questionnaire survey to assess



Long-term constipation



Fecal incontinence rate

830 patients with proven HD

619 patients sent questionnaires to assess functional outcomes

346 respondents to functional outcomes questionnaire



Risk of permanent stoma:
Odds Ratio (OR) = 1.01, $p = 0.019$



Risk of temporary stoma:
OR = 1.01, $p = 0.022$

Increasing age at surgery



Risk of mortality



Risk of complications



Risk of redo surgery

Adjusted for operation technique

Unadjusted for operation technique



Age at surgery



Constipation:
OR ~ 1.00, $p = 0.613$ (univariable),
0.356 (multivariable)



Fecal incontinence:
OR ~ 1.00, $p = 0.408$ (univariable),
0.753 (multivariable)

The optimal timing for resection surgery in HD remains unknown as inconclusive findings suggest that the age at surgery does not influence surgical outcomes of patients with HD

Did Age at Surgery Influence Outcome in Patients with Hirschsprung Disease? A Nationwide Cohort Study in the Netherlands

Roorda et al. (2022)