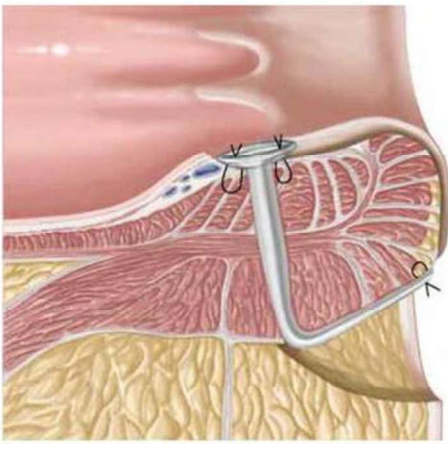
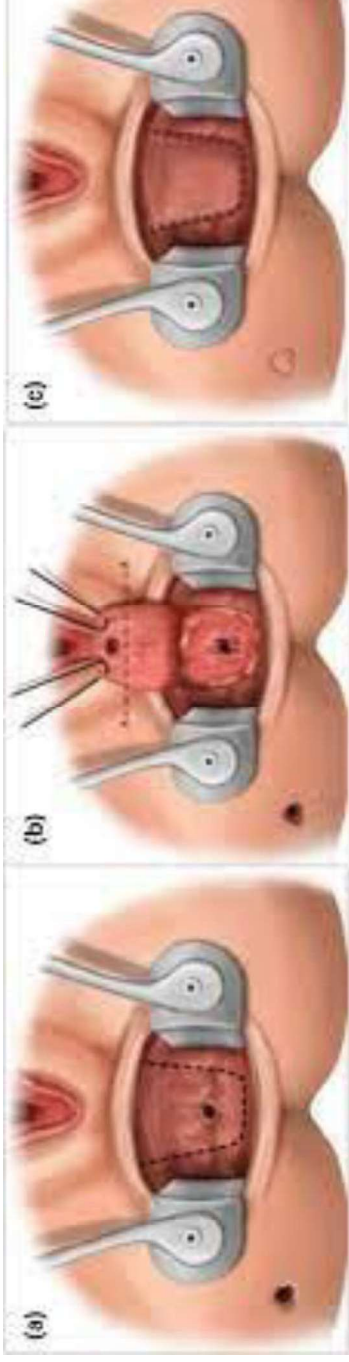


Fistula plug

- Biodegradable xenograft of collagen
- Easy to insert
- Very expensive
- 50-60% overall success rate at 1 year
- Very safe



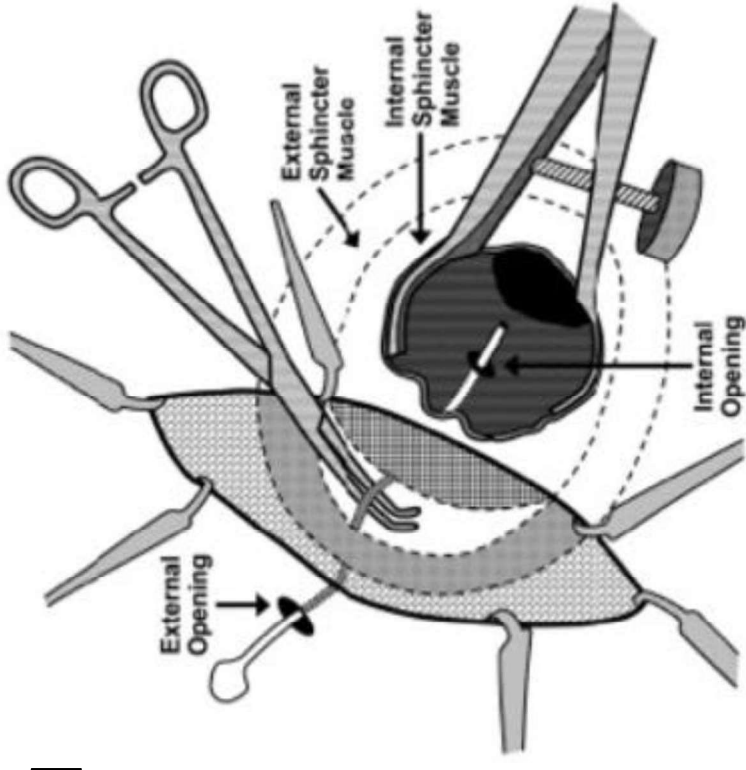
Advancement flap



- Technically easy to do
- High success rate for non-Crohn's patients (80-90%)
- Subgroup analysis for Crohn's:
 - 70% at 1 year
 - 60% at 2 years

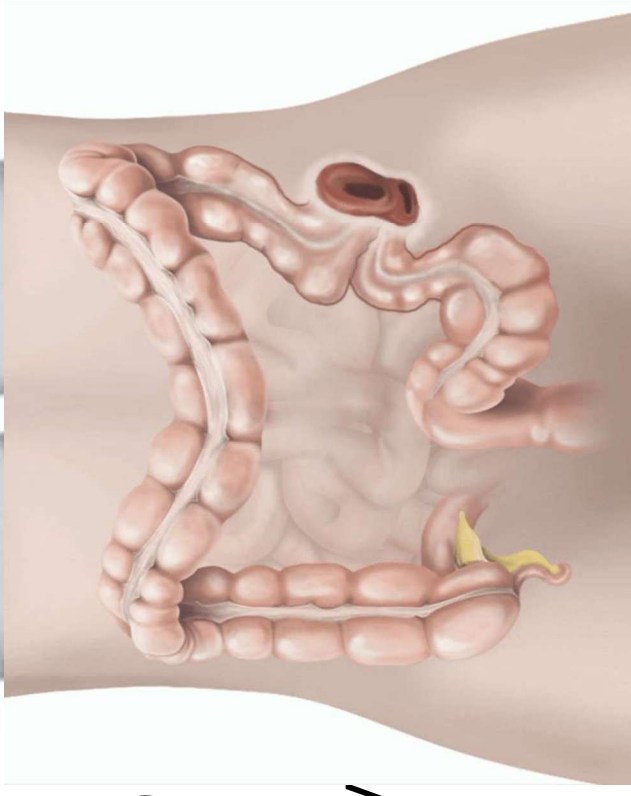
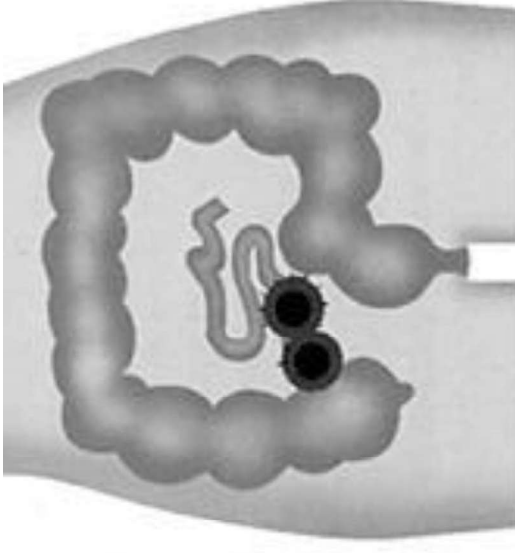
Ligation of Intersphincteric fistula (LIFT)

- Very poor result, painful as well
- No RCTs, level III, small sample size
- 50% failed by 10 months, 75% failed by 1 year
- Avoid in Crohn's



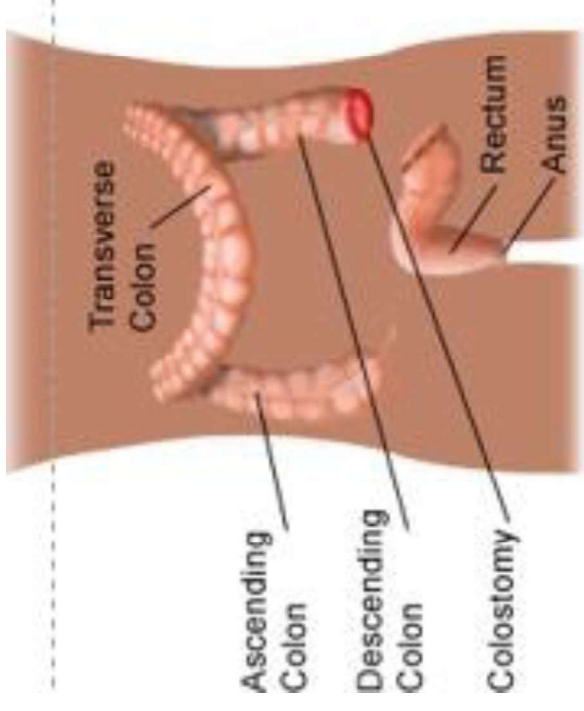
Diverting stoma

- Not most favoured, stigma and issues of a stoma
- Easily performed laparoscopically
- Reversible (so could the Crohn's)
- Controls mucosal Crohn's distally



Proctectomy

- Ultimate cure for perianal disease
- Irreversible decision
- Major surgery
 - Adhesions
 - Subfertility / Impotence
 - Perineal wound infection / hernia



Summary of management

- Drain sepsis
- Identify any associated mucosal Crohn's
- Fistulectomy / Seton +/- Abx
- Medical treatment: Top down or Step up / Vedolizumab
- If you are in Europe or USA, Darvadstrocel injection
- Secondary surgery: Plug, flap, stoma or proctectomy

Comments?