



**COLORECTAL CLINIC  
CLINICAL ASSESSMENT, DIAGNOSTIC TESTS and PELVIC  
FLOOR REHABILITATION PROCEDURES**

**Dr Massimo Cristaldi FACS FASCRS  
Consultant Colorectal Surgeon**

Dear Sir / Madam,

With this leaflet, we would like to provide you with some information about the basic clinical assessment and office base test that you may undergo when you will attend your appointment at Harley Pelvic Care Centre – Colorectal Clinic.

Initial assessment consists of standard physical examination which is done fully respecting your privacy, minimizing exposure of body parts and therefore reducing the embarrassment and discomfort that this type of examination may naturally entail. According to your clinical condition, the doctor may require performing additional office tests. With the vast majority of cases, these tests may be carried out after the initial assessment. These tests are called **Anoscopy, Anorectal Manometry, Anal and Pelvic Floor Electromyography and Pelvic Dynamic and Proctogram MRI**. Once the diagnosis is established the doctor will be explaining the results of the investigation and what is required to fix your conditions. Whenever surgical procedure is required your doctor will provide full information about that. It is also possible as it happens in a large percentage of cases that your condition is amenable to be treated by special rehabilitation techniques which are called **Biofeedback Pelvic Floor Retraining and Electrotherapy**.

We hope that this leaflet will clarify all your questions and your doubts about these procedures prior to your appointment, but we shall immensely appreciate any feedback or any advice you would like to provide us with.

*Sincerely,*

**Dr Massimo Cristaldi FACS FASCRS  
Consultant Colorectal Surgeon**

## Anoscopy

This is a standard investigation which is carried out with a small, rigid, self-illuminated and disposable instrument which is inserted into the anal canal to allow visual inspection. The procedure is performed using a lubricant gel to minimize the friction and facilitate the introduction. The procedure is generally rapid, lasting on average no more than one minute and it is very well tolerated with minimal discomfort.

## Anorectal Manometry

Rectal manometry is a test used to measure and assess pressure, reflex and sensation in the rectum. The test also evaluates the efficiency of the anal sphincter. The procedure will help your doctor evaluate the cause and determine the correct treatment of fecal incontinence or constipation. While lying on your left side, a thin flexible catheter with a small uninflated balloon at the tip is passed through the anus and into the rectum. The catheter is slowly withdrawn while numerous pressure measurements are recorded. You will also be asked to push and squeeze your anal muscles at certain times. You will also be asked to indicate when you experience a feeling of fullness or distension in the rectum, upon inflation of a small balloon at the end of the catheter. The test is not painful and is performed with the complete respect of patient privacy and avoiding unnecessary exposure of private parts.

- Do not take smooth muscle relaxants (Valium, or narcotic pain medications) 24 hours prior to your appointment time.
- Use Fleet enema when it is prescribed by your doctors and apply it one hour before coming to the hospital for your appointment.

## **Electromyography of Anal Canal and Pelvic Floor**

The electromyography involves direct recording of muscle electrical activity at rest and during specific contractions that you will be requested to perform during the test. Registration will be performed using a small probe inserted in your back passage and superficial registration electrodes applied on your lower abdomen in order to allow simultaneous registration of the activity of your accessory muscles. During the test you will be prompted the instructions on the computer screen and you will be able to visualize the muscular activity of your contraction directly on the computer screen.

The test will consist of registration of muscle activity at rest for 60 seconds then followed by a phase where the patient is asked to perform 5 rapid contraction over the period of 10 seconds and then followed by a phase of contraction maintained for 10 seconds followed by 10 seconds of rest, repeated for 5 times. Lastly, 60 seconds of resting registration phase. The test is not painful and is performed with the complete respect of patient privacy and avoiding unnecessary exposure of private parts.

- Do not take smooth muscle relaxants (Valium, or narcotic pain medications) 24 hours prior to your appointment time.
- Use Fleet enema when it is prescribed by your doctors and apply it one hour before coming to the hospital for your appointment.

## **Pelvic Dynamic and Proctogram MRI**

This is a special magnetic resonance of the pelvic floor that allow to visualize the dynamic phase of defecation in order to see how the pelvic organs interacts together during resting and dynamic phases of defecation. This is a non-radiologic test which requires one hour, and it is performed in a special radiologic suit with full respect of your privacy.

- Do not take smooth muscle relaxants (Valium, or narcotic pain medications) 24 hours prior to your appointment time.
- Use Fleet enema when it is prescribed by your doctors and apply it one hour before coming to the hospital for your appointment.

### **Biofeedback/Pelvic Floor Retraining and Electrotherapy**

In case your pelvic muscle are weaker than expected or are working in a way that is not coordinated you may be required to undergo session of rehabilitation that are permed with the aid of special instruments that will allow you to visualize the results of your effort and therefore improve the way you use your pelvic and anal muscles in order to improve specific conditions you may be affected with such as fecal incontinence, weakness of pelvic muscle, difficult rectal emptying and other. In same circumstances in order to improve strength and condition of your muscles it may be necessary to provide electrical stimulation which will be able to reinforce them to work more efficiency. These types of rehabilitation works are performed is a cycle of ten over 2-week period. Each session lasts between 20 to 30 minutes. These sessions are not painful and are performed with the complete respect of patient privacy and avoiding unnecessary exposure of private parts.

### **Contacts and feedback:**

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