Response Regarding: Endoscopic Management of Sigmoid Volvulus in a Debilitated Population: What Relevance?

Guilherme Simões Manuel Coelho da Rocha Tiago Capela Mário Jorge Silva
Gonçalo Ramos João Coimbra

Gastroenterology Department, Centro Hospitalar Universitário de Lisboa Central, Lisbon, Portugal

Keywords

Volvulus · Sigmoid · Elderly · Endoscopy · Surgery

Resposta em relação: Terapêutica endoscópica do volvo sigmoideu numa população debilitada – qual a relevância?

Palavras Chave

Volvo · Sigmoide · Idosos · Endoscopy · Cirurgia

We would like to express our appreciation for the comments and observations made by Dr Sabri Atamanalp regarding the article entitled “Endoscopic Management of Sigmoid Volvulus in a Debilitated Population: What Relevance?” [1].

In line with what you have stated, we were also able to identify predisposing factors for dolichosigmoid, namely chronic constipation, advanced age and care dependence. However, unlike in your report, neuropsychiatric disorders were frequent comorbidities reported in 59% of our patients. From the 31 patients reported, 16 (52%) had previous stroke and 11 (35%) had advanced dementia (one of them due to Parkinson’s disease).

In our cohort, the population was older and more debilitated, with a median age of 84 years (75% were more than 70 years old), mean Charlson comorbidity score of 6 and more than half were caregiver dependent. Nevertheless, the outcomes of endoscopic and surgical management of sigmoid volvulus in our cohort were similar to your series and to current literature [2–4].

Despite the efficacy of the endoscopic treatment in the emergency setting, most of the sigmoid volvulus patients will recur, and, therefore, elective surgery should be considered. There is lack of data or recommendations regarding who and when to refer for surgery, especially in the elderly and patients with multiple comorbidities.

As you stated, we also agree that elective surgery should be considered for patients with ASA score ≤ 3 , but we do not make the decision based on age. In our opinion, it will depend on case-by-case analysis, and all patients with a life expectancy of over 10 years should be referred for surgery. Our data and the current literature indicate that elective surgery is effective and safe in selected patients and may obviate later emergency surgery, reducing morbidity and mortality [5]. Nevertheless, in our cohort, only 9 patients underwent elective surgery, showing that the severe comorbidities limited the use of this surgical approach.

Statement of Ethics

This study did not require review or approval by the appropriate ethics committee.

Conflict of Interest Statement

The authors have no conflicts of interest to declare.

References

- 1 da Rocha MC, Capela T, Silva MJ, Ramos G, Coimbra J. Endoscopic management of sigmoid volvulus in a debilitated population: What relevance?. [GE Port J Gastroenterol](#). 2020 Apr;27(3):160–5.
- 2 Atamanalp SS. Treatment of sigmoid volvulus: a single-center experience of 952 patients over 46.5 years. [Tech Coloproctol](#). 2013 Oct;17(5):561–9.
- 3 Grossmann EM, Longo WE, Stratton MD, Virgo KS, Johnson FE. Sigmoid volvulus in Department of Veterans Affairs Medical Centers. [Dis Colon Rectum](#). 2000 Mar;43(3):414–8.
- 4 Safioleas M, Chatziconstantinou C, Felekouras E, Stamatakis M, Papaconstantinou I, Smirnis A, et al. Clinical considerations and therapeutic strategy for sigmoid volvulus in the elderly: a study of 33 cases. [World J Gastroenterol](#). 2007 Feb;13(6):921–4.
- 5 Larkin JO, Thekiso TB, Waldron R, Barry K, Eustace PW. Recurrent sigmoid volvulus - early resection may obviate later emergency surgery and reduce morbidity and mortality. [Ann R Coll Surg Engl](#). 2009 Apr;91(3):205–9.

Funding Sources

The authors have received no funding for the present paper.

Author Contributions

Guilherme Simões prepared the manuscript. Manuel Coelho da Rocha, Tiago Capela, Mário Jorge Silva, Gonçalo Ramos and João Coimbra revised the manuscript.