

Antegrade continence enema (ACE): Surgery

What is an antegrade continence enema?

“ACE” is the everyday term for “antegrade continence enema.” An enema causes a bowel movement by flushing the bowel with liquid. During surgery, a tube is created inside the body to allow this type of enema.

During surgery, a tube is made using tissue from your child’s own body: the appendix or a small piece of the intestine. The surgeon makes a stoma (small opening) at the belly button or the lower right side of the belly, and tunnels the tube from there into the bowel. A catheter is passed through the stoma, and into the bowel.

Through the catheter, normal saline (a salt water solution) will be given into the bowel as a daily enema, causing a bowel movement through the rectum about 30 to 60 minutes later. The surgery allows most children to give their own enemas, increasing their independence.

What can I expect before surgery?

Your doctor may want your child to follow a special diet before coming to the hospital.

The day before surgery, your child may be admitted to the hospital to start a bowel clean-out, called a “bowel prep.” (See the education sheet “Bowel prep in the hospital before surgery.”)

During the bowel prep your child cannot have anything to eat or drink. After the bowel prep, your child can have only clear liquids.

What should I expect after surgery?

The surgery will take 2 to 3 hours and is often done with other surgical procedures your child may need. After surgery, your child will go to the recovery room for a short time, and then back to a regular room. See the education sheet “Post-Anesthesia Care Unit (PACU).”

Your child will have an intravenous line (IV), as well as a catheter in the ACE. There may also be a nasogastric (NG) tube leading from the nose into the stomach, to keep the stomach empty. The NG tube will stay in place for a few days, until the bowel has healed enough to start working again.

Your child’s vital signs (blood pressure, temperature, heart rate, and breathing rate) will be monitored and pain medicine will be given.

After the NG tube is taken out, your child will progress from drinking clear liquids to eating solid food as tolerated.

The hospital stay may last 2 to 7 days, depending on what other procedures have been done at the same time.

How should I care for my child?

Gently clean around the tube every day with water and pat dry. Soap is not needed. If there is a bandage, change it daily.

Your child will have a catheter in the ACE. The catheter allows the tube and the stoma to heal. You will need to put a small amount of normal saline into the catheter each day; this is called “irrigation.” The amount of normal saline is increased on a regular schedule until your child has a good bowel movement.

Before you take your child home, your nurse will teach you how to irrigate your child’s catheter, and will give you a schedule for when and how much saline to give each day. See the education sheet “Antegrade continence enema (ACE): Irrigation.”

You will need to keep your child on the bowel program used before surgery, until the new irrigations work well.

What can my child eat?

At home, your child can eat as usual, including fiber and plenty of liquids.

How active can my child be?

Your child may bathe or shower.

Because your child will have a catheter in the stoma, **limit activity**. Avoid any stress to your child’s abdominal (belly) area. While the catheter is in, do not let your child play actively: no bike riding, swimming, digging in the sand, or recess play; no sports or gym class.

What else do I need to know?

Your child’s catheter will be taken out at an appointment a few weeks after surgery.

The doctor or a nurse will teach you and your child how to pass the catheter into the stoma.

You will be given a prescription for catheters to fit your child’s stoma.

When should I call the surgeon?

- if the catheter falls out
- temperature of 101.5° F or higher
- more than just a little bleeding at the stoma
- unable to irrigate the ACE

Questions?

This sheet is not specific to your child but provides general information. If you have any questions, please call your clinic.

For more reading material about this and other health topics, please call or visit the Family Resource Center library, or visit our Web site: www.childrensmn.org.

Children’s Hospitals and Clinics of Minnesota
Patient/Family Education
2525 Chicago Avenue South
Minneapolis, MN 55404
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