This information leaflet explains rectal dilatation and why your child needs this procedure. It includes step-by-step instructions on how to do rectal dilatations at home, the risks of the procedure and advice on what to do if you have any problems. If you have any other questions or concerns, please contact the doctors or nurses caring for your child. Please find contact details provided at the bottom of this information leaflet.

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your name and date of birth and check your ID band. If you don’t have an ID band we will also ask you to confirm your address.

If we don’t ask these questions, then please ask us to check. Ensuring your safety is our primary concern.
Why does my child need rectal dilatation?
Your child normally needs rectal dilatation if they have been diagnosed with one of the following conditions:
• Anorectal malformation
• Hirschsprung disease
• Anal strictures

They will also need rectal dilatations after operations such as pull-through or posterior sagittal anorectoplasty (PSARP) procedures. We will discuss with you at your child’s clinic appointment the specific reason why they need to have this procedure.

What is rectal dilatation?
Rectal dilatation is a way of stretching your child’s anus to help stop it from getting smaller or to increase its size. This will make it easier for your child to pass stools (bowel motions).

A device called a Hegar dilator, which is slim and smooth, is inserted in to your child’s anus to gently and gradually stretch it. As their anus stretches, larger dilators are used until the anus is an appropriate size for your child’s age.

The procedure is not painful but your child may feel uncomfortable. A member of our surgical team will do the first rectal dilatation and decide what size dilator to use and how far to insert it. Usually only a few centimetres of the dilator needs to be inserted into your child’s anus to achieved adequate stretch.

Your child’s clinical nurse specialist (CNS) or doctor will teach you how to do this so you can continue the treatment at home. The doctor will tell you how many times a day you need to do it and how for how long. Your child will be brought into hospital a few
weeks later for a review by the clinical nurse specialist (CNS) or doctor before increasing to a larger dilator.

**How often do I need to do the rectal dilatation?**

Your child’s doctor or surgical CNS will tell you:
- How many times a day to do the procedure
- The size of dilator to use
- How much of the dilator to insert into your child’s anus
- How long to hold the dilator in their anus
- When to start using a larger dilator

**How long will my child need rectal dilatation?**

Your child’s doctor will let you know how long your child will need this procedure. It will depend on their diagnosis and their treatment plan.

Once your child has reached the desired dilator size and they are passing bowel motions without difficulties, the doctor may advise you to do dilatations less often.

**What do I need in order to do the procedure at home?**

- The right size dilator. Your child’s doctor will tell you which size to use
- Water-based lubricant, such as K-Y jelly
- A towel
- A fresh nappy and wipes, cotton wool, barrier cream and anything else you normally use for your child’s nappy care
- Support from another person if your child is mobile
How do I do the rectal dilatation?

1. Wash your hands.
2. Put the towel under your child’s bottom & remove their nappy.
3. Hold their legs up towards their stomach, so you can easily see their anus. This is easier if a second person is helping you.
4. Dip the end of the dilator into the lubricant.
5. Insert the dilator into your child’s anus, up to the length shown by your doctor. It does not matter if the curve of the dilator is facing up or down, as long as you put it in straight.
6. Only insert the dilator when your child is relaxed. You can move their legs up and down to help them relax.
7. Hold the dilator in place for the time advised by your child’s doctor.
8. Gently take out the dilator and give your child nappy care: wipe their bottom, put on barrier cream and so on.
9. Clean the dilator with soap and water. It does not need to be sterilised.

What should I do if...

...I forget to do the rectal dilatation?
Do the dilatation as soon as you remember. But do not do it if it is late in the day; simply continue as normal the next day.

...the dilator comes out?
Dip the end of the dilator into the lubricant and put your child in position again.

Insert the dilator to the length and for the amount of time recommended by your child’s doctor.

...my baby passes a stool during the rectal dilatation?
This is normal and often happens. Stop the dilatation and take out the dilator. Allow your child to pass the stool, clean them and the
dilator, put on more lubricant and insert the dilator again for the remaining length of time required.

...my child keeps crying and I can’t insert the dilator?
If at any time you have difficulty putting in the dilator, stop! Forcing the rectal dilatation will cause pain. Settle your child and try again.

Make sure your child’s legs are in the correct position and there is enough lubricant on the dilator. If possible, ask another person to support and hold your child’s legs while you insert the dilator.

Only put the dilator in when your child is relaxed. You can move their legs up and down to help them relax.

If you continue to struggle to insert the dilator, it may be because your child’s anus has narrowed and you need to use a smaller dilator.

If you do not have a smaller dilator, you may need to bring your child to the hospital for the dilatation to be done with the support of one of our team. Contact the surgical CNS or the Children’s surgical ward for advice (see page 4 for contact details).

What are the risks of rectal dilatation?

• Bleeding
It is normal to see a small amount of blood, especially if it was difficult to insert the dilator or you have recently increased the size. Stop the dilatation and contact your child’s surgical CNS or doctor for advice.

If you notice an amount of blood that is larger than you have been advised is normal by your child’s surgical CNS or doctor, stop rectal dilatation and take your child to your local Emergency Department (ED/A&E) straight away.
• **Small anal tear**
If you notice a small anal tear, _stop rectal dilatation_ and contact your child’s surgical CNS or doctor.

• **Rectal perforation**
This is very rare. If your child is unwell with fever, vomiting, a swollen tummy (distended abdomen) and not passing bowel motions after rectal dilatations, please take them to your local Emergency Department (ED/A&E) _straight away_.

• **Pain**
Your child may have some discomfort, usually when increasing the dilator to a larger size. This should ease over a few days as their anus stretches. If they are in a lot of pain or discomfort _stop rectal dilatations_ and contact your child’s surgical CNS or doctor.

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**Dilatation record sheet and plan**

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<tr>
<th>Week number</th>
<th>How many times a day</th>
<th>Insertion time (Seconds)</th>
<th>Dilator size</th>
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_If at the end of a week it is hard to insert the dilator, keep using the same size for another week until it becomes easier to insert._
Who can I contact with queries and concerns?

Children’s Surgical Ward
Tel: 020 3299 3312, open 24/7

Paediatric surgical CNS
Tel: 020 3299 3189, 9am–5pm, Monday to Friday

PALS
The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams. The PALS office is located on the ground floor of the Hambleden Wing, near the main entrance on Bessemer Road - staff will be happy to direct you.

PALS at King’s College Hospital, Denmark Hill, London SE5 9RS
Tel: 020 3299 3601
Email: kch-tr.palsdh@nhs.net

If you would like the information in this leaflet in a different language or format, please contact Interpreting Services on 020 3299 4826 or email kch-tr.interpreting@nhs.net.