

**COMMENT ON: CURRENT STATUS OF FUNCTIONAL GASTROINTESTINAL EVALUATION IN CLINICAL PRACTICE**

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Dear Sir,

We read with interest the review article by Ang et al,<sup>(1)</sup> published in the latest February edition of *SMJ*, in which the authors provided a summary of the investigative modalities for the evaluation of functional gastrointestinal (GI) motility disorders. We would like to take this opportunity to share our experience at the Singapore General Hospital.

Firstly, magnetic resonance defaecography (MRD) has been available at our institution for the past five years, with at least 11 patients in our department having undergone MRD as part of their evaluation for pelvic floor surgery, particularly when conservative measures like pelvic floor rehabilitation have failed. MRD provides real-time assessment of pelvic floor and anorectal movements, highlighting any functional and anatomical pathology, including puborectalis paradox, excessive perineal descent and rectal prolapse syndromes.

Secondly, our department has been performing 3D-anorectal ultrasonography since November 2009, with approximately 100 procedures performed annually. This modality forms an essential component of our investigational armamentarium for functional lower GI and colorectal disorders (Table I).

Thirdly, our department has also been using dynamic transperineal ultrasonography in the investigation of pelvic floor disorders. A more affordable alternative to MRD, it also provides real-time imaging of the movements of the pelvic floor musculature and organs, albeit at a lower resolution, and is more operator-dependent. In our experience with 18 patients over a two-year period, we have found it useful in the workup for patients with functional constipation, with resultant diagnosed conditions such as puborectalis paradox (n = 5), occult rectal prolapse (n = 9) and bladder/uterine prolapse (n = 8).

In conclusion, we hope that our contribution will complement the review article and also reinforce Singapore's role in the region as a leader in functional GI disorders management.

**Table I. 3D-anorectal ultrasonography procedures done in the past five years in Singapore General Hospital.**

Year	Faecal incontinence	Functional constipation	Fistula-in-ano	Perianal abscess	Rectal prolapse	Total
2010	35	2	18	16	1	72
2011	28	2	12	10	1	53
2012	54	3	8	9	2	76
2013	41	2	83	15	3	144
2014	43	5	71	9	2	130

Yours sincerely,

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1. Ang D, Fock KM, Law NM, Ang TL. Current status of functional gastrointestinal evaluation in clinical practice. *Singapore Med J* 2015; 56:69-80.