



DIGESTIVE DISEASE INSTITUTE

Colorectal Center for Functional Bowel Disorders



Taking Control
of Your Bowels

Using state-of-the-art diagnostics and decades of experience, we determine the cause of patients' problems and then tailor the most appropriate treatment. You can rely on our success in both diagnosing and treating a full spectrum of bowel disorders.

Don't wait. You don't have to let bowel problems control your life.

ABOUT US

At the Colorectal Center for Functional Bowel Disorders at Cleveland Clinic, we've designed our services so that all of the specialists you need – including gastroenterologists, gynecologists, colorectal surgeons and physical therapists – work together to help you regain control.

One call puts you in touch with our multidisciplinary team, led by a group of female physicians, who are dedicated to compassionately working with patients to find the most effective treatments for their problems.

DIAGNOSTIC TECHNOLOGY

Thorough evaluation and accurate diagnosis is critical to receiving the most appropriate treatment. At the Colorectal Center for Functional Bowel Disorders at Cleveland Clinic, we offer the most thorough diagnostic tests available, including:

- **Anorectal manometry** – A test studying the strength of the sphincter muscles.
- **Electromyography (EMG)** – A test of the muscles around the anus to determine if the sphincter muscle and nerves are intact and function normally.
- **Pudendal nerve terminal motor latency** – A procedure that uses electrical impulses to measure the function of the pudendal nerves, which are often involved with incontinence, constipation and rectal prolapse (rectum falling out of place).

216.444.6536



DON'T SUFFER IN SILENCE.

We can help.

Bowel problems **aren't as uncommon** as you might think.

In fact, millions of Americans suffer from a wide range of bowel problems: loss of bowel control, constipation, hemorrhoids, discomfort or pain – just to name a few. Yet, many people often don't seek help because they're too embarrassed or aren't sure where to turn.

The good news, however, is that effective treatments are available. The Colorectal Center for Functional Bowel Disorders at Cleveland Clinic has the most experienced group of specialists in the region. *U.S. News & World Report's* "America's Best Hospitals" survey has ranked our digestive disease services as #2 in the nation every year since 2003 and #1 in Ohio since 1990.

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- **Endoluminal ultrasound** – Provides 2-D and 3-D, real-time images that help evaluate the anatomy of the sphincter muscle and surrounding tissue.
- **Defecating proctogram** – An X-ray study that evaluates the function of the lower bowel.
- **Colon Transit Study** – This X-ray study uses markers to estimate the time it takes for fecal matter to travel through the colon.
- **Dynamic magnetic resonance imaging (MRI)** – Using a series of MRI images to look at pelvic structure.

WHAT WE TREAT

Common conditions treated at Cleveland Clinic's Colorectal Center for Functional Bowel Disorders include:

Fecal incontinence

The inability to hold on to liquid or solid stool. Sometimes simple changes in diet or the elimination of medications can cure incontinence. More frequently, treatment involves a combination of therapies.

Treatment options:

- **Medications** – Anti-diarrheal drugs, or others medications, may be used to decrease bowel movement frequency or reduce the water content of the stool.
- **Biofeedback** – A method of strengthening and coordinating pelvic floor muscles, as well as heightening awareness of the sensation related to the rectum filling with stool.
- **Sphincter repair** – A surgical procedure to repair a damaged or weakened anal sphincter.
- **Artificial bowel sphincter** – An implantable device used to replace a damaged sphincter.
- **Newer treatments** under research protocols.

Chronic constipation and other difficulties

Constipation is considered chronic when you have fewer than two bowel movements a week or an inability to pass stool. Changes in diet and exercise, as well as over-the-counter medications can help. You may benefit from treatment with biofeedback, or in extreme cases, require surgery.

Another common issue is having great difficulty evacuating stool. Causes include rectal prolapse, paradoxical contractions or non-relaxing muscles, sigmoidocele and enterocle (when the sigmoid colon or pelvic floor weaken and drop). Evaluation by a Colorectal Center for Functional Bowel Disorders physician specialist is needed for treatment, such as:

Treatment options:

- **Medications** – Fiber supplements, stool softeners and laxatives are often recommended.
- **Biofeedback** – A method of strengthening and coordinating pelvic floor muscles, as well as heightening awareness of the sensation related to the rectum filling with stool. Electrical stimulation is also offered.
- **Physical therapy** – Exercises to normalize muscle tone and restore function.
- **Injection treatment** – Use of an injection into the surrounding muscle to improve emptying ability.
- **STARR procedure** – A minimally invasive surgical procedure, which leaves no visible scars, removing excess tissue to help the rectum function more effectively.
- **Surgery for rectal prolapse** – A procedure that returns the rectum to its original position and anchors it in place.
- **Pelvic floor repair** – Restoring the pelvic floor, which supports the bladder, bowel and uterus.

Anorectal disease

Both men and women can suffer from anorectal disease, which includes hemorrhoids, fissures and fistulas.

Hemorrhoids

Although hemorrhoids are present in everyone, it is only when these blood vessels that line the anal region become overly irritated and inflamed that you may need treatment. There are two types of hemorrhoids, internal and external. The exact cause of hemorrhoids is not known, but contributing factors include aging, chronic constipation or diarrhea, pregnancy, family history and straining during bowel movements.

Treatment options:

- **Hemorrhoid banding** – The placement of small rubber bands around the base of the hemorrhoid, done in our specialists' offices.
- **Stapled hemorrhoidectomy** – A procedure that repositions the hemorrhoids and fixes them in place.
- **Doppler-guided hemorrhoid treatment** – Using ultrasound to find the rectal arteries and block blood supply to hemorrhoidal tissue.
- **Excisional hemorrhoidectomy** – A surgical procedure to remove hemorrhoid tissue.

Fissures

An anal fissure is a small tear or cut in the skin lining the anus which can cause pain and/or bleeding. Fissures can be caused by a hard, dry bowel movement, as well as diarrhea and inflammation of the anorectal area.

Treatment options:

We evaluate and treat both chronic and acute fissures with all of the newest medical, minimally invasive and surgical advancements available.

Anal Fistula

When an abscess forms on the anal gland, a small tunnel can form from the gland to the skin outside the anus. Certain conditions, such as colitis or other inflammations of the intestine, can make people more prone to these infections.

Treatment options:

- **Fistulotomy** – Surgically opening a fistula, allowing it to heal.
- **Advancement flap repair** – A surgical option for more complex fistulas in which a portion, or flap, of the rectal wall is used to seal the opening.
- **Seton insertion / cutting seton** – For deeper fistulas, a seton is used to gently cut through the tunnel to allow the tissue to heal.
- **Anal fistula plug** – An implant is inserted, allowing the fistula to heal naturally.

Rectovaginal fistula

An abnormal passageway between the rectum and vagina. Rectovaginal fistula can occur in women after trauma during childbirth, surgery or inflammatory bowel disease.

Treatment options:

- **Flap repair** – A surgical procedure using rectal lining tissue to cover the opening.
- **Rectovaginal plug** – Implantation of tissue to close the fistula.
- **Episioproctotomy** – Using anal muscle to reinforce a repaired opening.
- **Abdominal repair** – Reconstructive surgery to close the fistula.

Additional treatment options

Many **non-surgical** treatment options are available in Colorectal Center for Functional Bowel Disorders specialists' offices:

- **Electro-galvanic stimulation** – This treatment for pelvic pain and levator ani syndrome uses electric stimulation to reprogram tense and stiff muscles to make them relax and reduce pain.
- **Trigger point injections** – Injections used to inactivate trigger points, or hypersensitive bundles in muscle tissue, to alleviate pain.
- **Biofeedback** – Used to improve strength and coordination of the anus and pelvic floor muscles.
- **Pelvic floor relaxation** – A method of relaxing the tense and shortened muscles in the pelvis to alleviate pelvic pain and non-relaxing sphincters.
- **Acupuncture** – A form of pain management using needles inserted at precise acupuncture points elsewhere within the body, often used to manage pelvic pain and non-relaxing sphincters.

The Colorectal Center for Functional Bowel Disorders at Cleveland Clinic also has a research group that is actively working to improve treatment options for our patients. This means our patients benefit from having access to clinical trials, should they qualify. These research studies not only provide treatments otherwise unavailable, but they also help us expand our overall understanding of bowel disorders.



MAKING AN APPOINTMENT

Call **216.444.6536** or
800.223.2273, ext. 46536
to make an appointment
with any of our experts at
Cleveland Clinic's Colorectal
Center for Functional
Bowel Disorders.

OUR PHYSICIANS



Dr. Massarat Zutshi

Dr. Tracy Hull

Dr. Brooke Gurland

BROOKE GURLAND, MD

Dr. Brooke Gurland is a staff physician in the Digestive Disease Institute and sees patients at the Colorectal Center for Functional Bowel Disorders at Cleveland Clinic.

Dr. Gurland received her medical degree from Hahnemann University Medical College, Philadelphia. She completed her residency at Mount Sinai School of Medicine, New York, N.Y. and her fellowship at Cleveland Clinic in Florida.

Her clinical and research interests include colorectal surgery, pelvic floor surgery and laparoscopic surgery.

OUR PHYSICIANS

TRACY L. HULL, MD

Dr. Tracy Hull is a staff physician in the Digestive Disease Institute and sees patients at the Colorectal Center for Functional Bowel Disorders at the Cleveland Clinic.

Dr. Hull received her medical degree from The Ohio State University College of Medicine and Public Health in Columbus, Ohio. She completed her residency at State University New York Health Science Institute at Syracuse in Syracuse, N.Y. and her fellowship at Cleveland Clinic.

Her clinical and research interests include fecal incontinence, colon and rectal cancer, ulcerative colitis, Crohn's disease, diverticulitis and rectal prolapse.

MASSARAT ZUTSHI, MD

Dr. Massarat Zutshi is a staff physician in the Digestive Disease Institute and sees patients at the Colorectal Center for Functional Bowel Disorders at Cleveland Clinic.

Dr. Zutshi received her medical degree from Grant Medical College, University of Bombay, Bombay, India. She completed her fellowship at Cleveland Clinic.

Her clinical and research interests include pelvic floor dysfunction, rectal prolapse, fecal incontinence, constipation and anorectal disorders.

About the Digestive Disease Institute

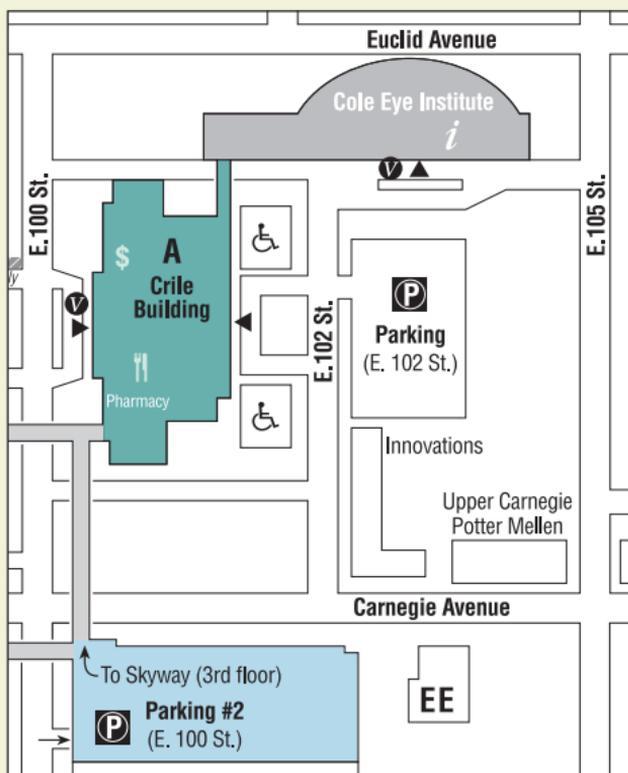
Of the top digestive disease centers in the United States, the Cleveland Clinic Digestive Disease Institute is the first of its kind to unite all specialists in gastroenterology and hepatology, colorectal surgery, hepato-pancreato-biliary and transplant surgery, and nutrition therapy within one unique, fully integrated model of care – aimed at optimizing the patient experience.

This exciting change also helps us offer the most advanced, safest and proven treatments performed in the most effective and patient-friendly way, including shorter waits for appointments and more seamless interaction with all of our specialists. In addition, our institute model enhances opportunities for cutting-edge research and physician education.

216.444.6536

DIRECTIONS TO THE CLEVELAND CLINIC DIGESTIVE DISEASE INSTITUTE

- Parking is available in Parking Garage #2 at the corner of E. 100 and Carnegie Avenue.
- Enter the Crile, or “A” building through the skyway.
- You will arrive on the second floor of the A building.
- Take the elevators to the third floor, and check in at desk A30.



Visit us on the Web at:
clevelandclinic.org/takecontrol

To make an appointment call:
216.444.6536



9500 Euclid Avenue, Cleveland, OH 44195

The Digestive Disease Institute is one of 26 institutes at Cleveland Clinic that group multiple specialties together to provide collaborative, patient-centered care. Our colorectal and gastrointestinal specialists serve more than 66,000 patients annually. Innovative procedures and decades of experience enable our physicians to achieve success in preventing and treating the full spectrum of digestive diseases. Cleveland Clinic is a nonprofit, multispecialty academic medical center. Founded in 1921, it is dedicated to providing quality specialized care and includes an outpatient clinic, a hospital with more than 1,000 staffed beds, an education institute and a research institute.

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