

Rectocele

What is a rectocele?

A **rectocele** is a bulge from the wall of the rectum pushing into the vagina. This can happen when wall of the rectum becomes thin and weak. It may push and bulge or balloon out into the vagina when you have a bowel movement.



"Rectocele Diagram" by BruceBlaus, CC BY-SA 4.0, via Wikimedia Commons

There are other structures that may also bulge into the vagina.

- A **cystocele** is when the bladder bulges into the vagina.
- An **enterocele** is when the small intestine pushes down on the vagina from above.
- **Uterine prolapse** is when the uterus bulges into the vagina.

What causes a rectocele?

The wall between the front wall of the rectum and the back wall of the vagina is called the **rectovaginal septum**. The thinning of the rectovaginal septum and weakening of the pelvic muscles can cause a rectocele.

The most common cause for this rectovaginal septum thinning and pelvic structure weakening is childbirth. When straining to give birth, the muscles and ligaments (connective tissues) in the pelvis that hold up and support the pelvic floor and vagina can become stretched and weakened.

- The more babies you have, the more the support tissues are stretched and weakened.
- Not everyone who has a baby will develop a rectocele. Some people have stronger supporting tissue in the pelvis and may not have as much of a problem as others.

Other conditions that can cause a rectocele include chronic **constipation** (having hard bowel movements or not being able to have a complete bowel movement), a chronic cough, a lot of heavy lifting, and obesity (having larger amounts of body fat). Older people may have this problem because losing hormones later in life causes the vaginal tissue to become weaker.

What are the signs and symptoms of a rectocele?

You may not have any symptoms. If you do have symptoms, they may include:

- Feeling pressure around your rectum
- The lower part of your vaginal wall sticking out through the opening of the vagina
- Constipation and a feeling of stool (poop) being stuck at the opening of the rectum, making it hard to have a bowel movement
 - You may have to press on the lower part of your vagina to help push the stool out of your rectum. This is called **splinting**.
 - A sudden urge to have a bowel movement after leaving the bathroom is caused by stool returning to the lower rectum that was trapped in the rectocele.

• **Incontinence** (leaking pee or poop), especially after having a bowel movement

How is a rectocele diagnosed?

- Your health care provider will ask about your symptoms and give you a pelvic exam.
 - Your provider will ask you to "bear down" (pushing like you are having a bowel movement) so they can see how far the lower part of the vaginal wall pushes into the vagina and possibly outside of the vagina.
 - Your provider will also ask you to contract the muscles of your pelvis (like you are stopping the stream of pee in the middle of urinating) to check the strength of your pelvic muscles.
- Your provider may also do a rectal exam.
- You may also be asked to have a **defecography**. A defecography is a special x-ray that looks at your pelvic organs while you are straining like you are trying to have a bowel movement.

How is a rectocele treated?

If the rectocele is not causing any symptoms, it does not need be treated. If you are having problems from a rectocele, you can improve your symptoms in the following ways:

- Try to avoid constipation. Eating and drinking lots of fiber and drinking 6-8 glasses of caffeine-free fluids every day can help keep your bowel movements soft.
- Avoid straining for a long time on the toilet. If your bowels will not completely empty after a bowel movement, get up and try again later.
- You might be able to use a **pessary** (a ring that is inserted in the vagina) to help support your pelvic organs.

- Avoid lifting heavy objects over 10 pouds. When you lift something, make sure to lift using your legs (not with your waist or back).
- If you have a regular cough, get treatment for a chronic cough or bronchitis.
- Do not smoke.
- Avoid gaining excess body fat.
- Do **Kegel exercises** (pelvic floor muscle exercises), especially after you have a baby.
- When you feel like you have stool stuck in the rectum, you could try
 splinting (inserting a tampon or two fingers inside the vagina and
 pushing back toward the rectum).
- If the rectocele is large, you may need surgery to fix it. A doctor may do rectocele surgery through the anus, vagina, **perineum** (the area between the anus and vagina), the abdomen (stomach). Often a combination of surgical and non-surgical treatments, like pelvic floor physical therapy, are needed to fix the problem with the rectocele.

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Author: Terri O'Neill, RN BSN Reviewer: Sarah Avey, RN BSN Edited by: Brittany Batell, MPH MSW

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