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Use of hyperbaric oxygen chamber in the management of radiation-related complications of the anorectal region: report of two cases and review of the literature.

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PURPOSE: This article was undertaken to present two cases of nonhealing ulcers that occurred after primary radiation therapy and local excision of suspected residual or recurrent anal carcinomas. Both patients responded favorably to hyperbaric chamber treatment. Review of the literature is discussed, including cause, clinical presentation, diagnosis, and options for management of radiation-related complications in the anorectal region and use of hyperbaric oxygen treatment in colorectal surgery. **METHODS:** The cases of two patients with recurrent or residual anal carcinomas were reviewed. Objective clinical, laboratory test, and intraoperative findings were implemented to define this pathologic entity precisely, results of its treatment, and management of radiation-related complications. **RESULTS:** The study shows clinical effectiveness of hyperbaric chamber treatment for nonhealing wounds in the previously radiated anorectal region. The refractory wounds of both our patients healed. The patients were rendered free of symptoms. **CONCLUSIONS:** Substantial pathologic changes in the irradiated tissues leading occasionally to nonhealing radiation proctitis are relatively infrequent consequences of radiation therapy for pelvic malignancies. Excisional and incisional biopsies of the radiation-injured tissues result in chronic ulcers accompanied by debilitating symptoms. Hyperbaric chamber treatment seemed to be a very effective means of therapy of radiation proctitis and nonhealing wounds in the involved anorectal region after conventional therapy had failed.

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