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Complete Rectal Prolapse: Etiopathogenesis, Diagnosis and Treatment

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Message from the Guest Editors

External rectal prolapse, rectal procidentia, or “complete” rectal prolapse (CRP), can be defined as a circumferential, full-thickness intussusception of the rectal wall which protrudes outside the anal canal.

Despite anatomical correction, patients frequently complain of persisting pelvic floor symptoms and recurrences. For this reason, the management of CRP is challenging for all coloproctologists specializing in anatomic-functional disorders of the pelvic floor.

The aim of this Special Issue is to provide a series of state-of-the-art manuscripts, including both original contributions and review articles, in order to reach a complete understanding of the etiopathogenesis, diagnosis, and treatment of CRP.



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Special Issue