Aims and Objective:
In management of pouch colon: is pouch should be preserved or not and to compare single stage management of all type of pouch colon after excising pouch with that of traditional three stage procedure.

Material and Methods:
Study conducted during 1996 - 2006, all patients of pouch colon were managed as a single stage procedure after excising the pouch. The detailed histo-pathological examination of excised pouch like; epithelium, lamina propria, muscularis mucosa, submucosa and muscle layer was done to support our view of excising the pouch. The histological finding of pouch colon was compared with that of resected portion of bowel in congenital anorectal malformation. Results were assed and compared with staged procedure.

Results:
A total of 141 cases of pouch colon were included in the study. Disruption of muscularis mucosa was present in >50% cases, hypertrophy of inner muscular layer, loss of organization of arrangement of muscle fibers and irregular muscle fiber were seen in 60%, 15% and >40% cases respectively in excised pouch. Constriction band were seen in inner circular layer. Hypertrophied nerve trunk observed in >30% of cases. Continence was good, fair, and poor respectively in 44%, 32% and 24% for single stage procedure and it was 29%, 20% and 51% for staged procedure.

Conclusion:
We think that pouch should be excised in cases of pouch colon and the trend for repair of anorectal malformation should move toward primary single stage repair in neonatal period which has equivalent result with that of staged procedure with minimal morbidity.