Rectal procidentia represents classically only 2% of rectal prolapse in children. This rarity is more apparent than real, because peritoneographies showing the excess of migration of the rectogenital pouch, allows to diagnose more often this pathology. The normal trend of this anomaly of the infant and the young child even if it could be serious with strangulation is usually a spontaneous healing. Accordingly therapeutic indications should be cautious. Surgery is only indicated in confirmed or complicated forms. After analysis of the statistic of 52 observations, the modified Lockhart-Mummery is our preferred procedure. It needs a short and simple surgery and the results appear satisfactory.

**MeSH:** Age Factors|Child|Child, Preschool|Defecation|Female|Humans|Infant|Male|Peritoneal Cavity|diagnostic imaging|Radiography|Rectal Prolapse|diagnosis|surgery|therapy

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