

**Aim of the Study**

To describe a case of ventriculoperitoneal shunt perforating the bowel and management options.

**Description**

A 10-year-old girl with myelomeningocele repaired at birth and VP shunt inserted for hydrocephalus, presented with a white tubing protruding through her anus. Colonoscopy showed the tube perforating the rectal wall. Decision was made to exteriorize the shunt through the anterior abdominal wall with the tubing cut near the exit site and the rest pulled out transanally. She never developed peritonitis and since there was no outflow from the shunt for 1 week with CT scan did not show any hydrocephalus, the VP shunt was removed.

**Conclusion**

In patients asymptomatic of infection (either meningitis or peritonitis) with a fairly distal protrusion of the shunt, it is possible to remove the tubing without resorting to a laparotomy.