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Variations in the urgent surgical treatment of obstructive rectosigmoid cancer

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Colorectal carcinoma is the most common malignant gastrointestinal tumor. It is believed that nearly 60% of mechanical bowel obstruction takes place due to colorectal tumors, 20% by diverticulosis and nearly 5% of intestinal obstruction is due to colonic volvulus. Despite the significant progress made in the field of screening, prevention and early diagnosis of colorectal cancer, the fact is that 20% of patients with colorectal carcinoma experience intestinal obstruction as a first symptom. Even though a large number of patients are being treated for this disease worldwide, there are still some disputes regarding the urgent surgical treatment of obstructive carcinoma of the left colon and rectum. We wanted to share our experience in the urgent treatment of this pathology. The patients with obstructive carcinoma of the rectum and sigmoid colon were treated with two different operating techniques: loop colostomy and Hartmann's procedure. One-hundred and twenty patients from two University Hospitals (University Hospital Bezanijska Kosa and Emergency Center for Surgery of the Clinical Center of Serbia) were followed up. This study was designed as a stratified randomized trial with four stratums according to age and ASA score (older/younger than 60 years and ASA score <>3). Each of the four groups was then divided into two sub-groups according to the operating technique: loop colostomy or Hartmann's procedure.

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