

Localisation and Preservation of the Autonomic Nerves in Rectal Cancer Surgery – Technical Details

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Abstract

Iatrogenic surgical injury to pelvic autonomic nerves followed by genitourinary dysfunctions are well known problems after total/partial mesorectal excision for rectal cancer. The purpose of our paper is to present the useful anatomical landmarks for a safe nerve-sparing surgery in rectal oncology. Over the course of a total mesorectal excision we describe and illustrate the key risk zones of autonomic nerve injury based on our experience in rectal surgery and on the revised literature.

Key words: rectal cancer surgery, autonomic pelvic nerves, nerve sparing rectal surgery

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