

Low Anterior Resection – Emergency Versus Elective Surgery in Rectal Cancer Treatment – Comparative Analysis

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Abstract

Background: Rectal cancer is a public health problem, being one of the most prevalent neoplastic localizations. The current surgical management of this pathology includes low anterior resection with colorectal anastomosis. The presentation as an emergency of these patients and the need for immediate intervention make it impossible to follow the necessary multimodal management. The present study proposes a comparative assessment of a series of cases where the intervention was elective, respectively emergency.

Methods: This is a retrospective, observational, descriptive, unicentric study, that took place between 1st of January 2010 and 31st of December 2018 in the 3rd Department of General Surgery of the University Emergency Hospital Bucharest. We included in the study patients with the discharge diagnosis of rectal neoplasm who underwent curative surgical treatment consisting of low anterior resection performed in compliance with oncological safety principles.

Conclusion: The emergency nature of the surgery influences whether or not a R0 type resection is obtained due to lack of adequate preoperative assessment (stadialization) and the presence or absence of neoadjuvant treatment rather than a technical defect.

Key words: rectal cancer, emergency, low anterior resection