

**Emergency Surgery in Colorectal Cancer: Experience of a County Hospital at a 10-Year Interval. Comparison of Immediate Postoperative Results**

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**Abstract**

A great majority of procedures for colorectal cancer are performed as emergencies, implying a high morbidity and mortality. The aim of this study is to compare the immediate postoperative results of emergency procedures for colorectal cancer between a 10 year interval in a single centre. We performed a retrospective research of the patients' files, totalizing 24 emergency operations in 2001 and 22 emergency operations in 2011. We followed demographic data, the complication which lead to emergency surgery, the time interval between the onset of the complication and the time of surgery, the type of procedure performed, postoperative morbidity and mortality. In 2001 we noticed morbidity in 66.66% of the cases (16 patients) and a mortality of 41.66% (10 patients), while in 2011 the postoperative morbidity was 54.54% (12 patients) and a mortality of 36.36% (8 patients). Conclusion: although both morbidity and mortality rates decreased in a 10 year interval, they still present high values, and the difference is not statistically significant ( $p = 0.21$  and  $0.40$ ).

**Key words:** colorectal cancer, emergency, morbidity, mortality

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