

Challenges and Solutions in Choosing the Surgical Treatment in Patients with Complicated Colon Cancer Operated in an Emergency – A Retrospective Study

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Abstract

Introduction: Choosing the optimal treatment for patients with complicated colon cancer operated in an emergency remains a challenge. The study aims to identify the factors that influence the therapeutic decision in these patients.

Patients and methods: We included in this retrospective study 449 patients operated in emergency for complicated colon cancer, in the Clinical Emergency County Hospital “St. Ap. Andrei” Galaţi between 2008-2017. The patients’ data were collected from the observation sheets, the surgical, imaging and laboratory protocols.

Results: The operations performed were: resections with a stoma in 37.63% of cases, resections with anastomosis in 36.97%, stomas in 16.26% and internal derivations in 9.13% of patients. Elderly age was correlated with stomas with or without tumour resection ($p < 0.05$). Preoperative diagnosis of IDH was associated with resections with anastomosis, those with occlusion were associated with internal derivations and those with digestive perforations with resections with a stoma ($p < 0.05$). The stomas were associated with the presence of intraoperatively detected complications ($p < 0.05$).

Conclusions: Complicated colon tumours operated on in an emergency require surgical treatment tailored to each patient. It is important to choose the type of treatment taking into account the patient's condition at admission, clinical-paraclinical data, tumour location, tumour complication and the presence of other complications detected intraoperatively.

Key words: complicated colon cancer, emergency surgery, correlations