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Simultaneous Approach of Colo-Rectal and Hepatic Lesions in Colo-Rectal Cancers with Liver Metastasis – A Single Oncological Center Overview

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Abstract

Introduction: Management of synchronous colorectal cancer with liver metastases (SCLM) is still on debate, regarding timing, indications and complications of the 3 strategies: classic approach (first tumor resection), simultaneous resection and reverse approach (liver first). A retrospective single-centre evaluation of synchronous approach was accomplished, focusing on surgical technique, indications and complications.

Material and Methods: Between 2017 and 2020, 31 SCLM patients benefited from synchronously colorectal and hepatic approach: segmental colectomies/rectal resections, simultaneously with liver metastasectomies (associated with radiofrequency ablation). Post-therapeutic imaging monitoring was performed from every 3 - 6 months. There were no perioperative complications related to the combination of the procedures, low morbidity and zero postoperative mortality.

Results: The follow-up period was 10 - 40 months: 13 patients had no evidence of recurrence, 10 had hepatic metastases in regression, 4 patients had signs of peritoneal carcinomatosis and 4 showed progression of liver disease; all patients were on chemotherapy. During follow-up 4 patients died.

Conclusions: Experience shows that the simultaneous approach of recto-colic and hepatic resections in colo-rectal cancers is a safe procedure, with low morbidity, the limits being dictated by the size of the liver metastases. The results at long-distance must be drawn by further consistent trials.

Key words: colo-rectal cancer, liver metastasis, simultaneous approach, surgical treatment, chemotherapy