

Evolution of Surgical Management of Complicated Left Colon Cancer

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Abstract

Complicated colon cancer accounts for up to 40% of colon cancer patients. While the management of complicated right colon cancer has some standard recommendations, for complicated left colon cancer single stage or two-stage procedures are subject to controversies. Aim: To study the types of procedures and postoperative morbidity and mortality for complicated left colon cancer patients admitted to the 1st Surgical Clinic of the County Clinical Emergency Hospital of Craiova during the past 23 years. We aimed to present the evolution of the surgical management in the emergency procedures for complicated left colon.

Material and method: retrospective study of patients with complicated left colon cancer admitted to our clinic between 2001 and 2023. We analyzed the postoperative morbidity and mortality of each type of emergency procedure (single stage or two-stage) and compared them throughout three periods of time.

Results: Three groups observed: G1 – 2001-2010, (96 patients); G2 – 2011-2016, (65 patients); G3 – 2017-2023, (77 patients). We registered significant increase in single stage procedures from G1 to G2 (11.2% vs. 33.8%). In G3, single stage procedure rate decreased significantly (20.8% vs. 33.8%). Postoperative morbidity and mortality was significantly lower in G2 compared to G1 in both single stage and two-stage procedures. G3 compared to G2 registered significant decrease for single stage procedures but similar for two-stage procedures.

Conclusion: For left colon emergencies, two-stage procedures seem safer, as resections with primary anastomosis, even with selected cases and experienced surgeons, still associate higher postoperative morbidity and mortality.

Key words: complicated left colon cancer, emergency surgery, primary anastomosis, single stage procedures