

# 36<sup>th</sup> World Cancer Conference & 3<sup>rd</sup> Edition of International Conference on **Colorectal Cancer**

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## Transanal minimally invasive rectal surgery

**Yahya Al-Abed**

Colchester Hospital University NHS Foundation Trust, UK

In recent times and with advent of technology, minimally invasive surgery has become the gold standard treatment for colorectal disease. Rectal surgery remains the most challenging and requires adequate training due to the complex anatomy and difficult access. The introduction of the laparoscopic and robotic surgery has improved the transabdominal access to the rectum. Over the past decades, however, the use of transanal endoscopic microsurgery (TEMs) has been limited to some rectal polyps. Recently, the introduction of transanal ports and the transanal minimally invasive surgery (TAMIS), the development of high definition camera systems, 3D technology and 4K screens access to the rectum has improved and this have allowed the introduction of transanal total mesorectal excision (TATME) surgery. Moreover, the indications for minimally invasive rectal surgery have expanded to include the treatment of rectal cancer. The purpose of this presentation is to review the indications, techniques and current evidence of minimally invasive rectal surgery.



**Figure 1:** TAMIS gelport

## Recent Publications

1. Eric Rullier, et al. (2017) Organ preservation for rectal cancer (GRECCAR 2): a prospective, randomised, open-label, multicentre, phase 3 trial. *Lancet*. 390(10093):469-479.
2. Garcia-Aguilar J, et al. (2015) Organ preservation for clinical T2N0 distal rectal cancer using neoadjuvant chemoradiotherapy and local excision (ACOSOG Z6041): results of an open-label, single-arm, multi-institutional, phase 2 trial. *Lancet Oncol*. 16(15):1537-1546.
3. Rackley T P, et al. (2016) Transanal local excision for patients with rectal cancer: can radiation compensate for what is perceived as a non-definitive surgical approach? *Dis Colon Rectum*. 59(3):173-8.
4. Borstlap W A, et al. (2016) Meta-analysis of oncological outcomes after local excision of pT1-2 rectal cancer requiring adjuvant (chemo) radiotherapy or completion surgery. *Br J Surg*. 103(9):1105-16.

## Biography

Yahya Al-Abed is a Consultant Colorectal and Minimally Invasive Surgeon based in London, United Kingdom. He has completed his Surgical Training at University of Edinburgh from London and Colchester and has special interest in minimally invasive surgery. He has contributed to multiple national and international presentations and he is involved in innovation and research.

yalabed@yahoo.co.uk