Karen Oliva et al., Arch Cancer Res 2018, Volume 6
DOI: 10.21767/2254-6081-C4-015

When to resect? Management of patients with adverse histopathological features post colonoscopic polypectomy

Karen Oliva[1], **Simon Wilkins**[1,2] and **Paul J McMurrick**[1]
[1]Cabrini Hospital-Malvern, Australia
[2]Monash University, Australia

Introduction: The aim of this study was to assess the surgical management and overall survival of patients with residual foci of malignancy and/or adverse histopathological features post polypectomy where major resection is undertaken as definitive treatment.

Methods: An analysis was conducted of a prospectively collected, clinician-led colorectal cancer database of private and public patients in Victoria, Australia from 2010-2017. Patient characteristics, surgical detail and histological outcomes together with patient follow-up were examined.

Results: A total of 176 treatment episodes were analyzed in the study period; age range was 22-88 years and 48% male. Pre-operative CEA was performed in 47% of cases, range 0.2-41.3 µg/L. Follow-up was available in 86.4% of cases and ranged from 21 days to 6.7 years. Median lymph node harvest was 14 with malignant lymph nodes (including a mesenteric tumor deposit) detected in 14 patients (8%). Surgical entry included 8 robotic cases and 1 transanal total mesorectal excision. Follow-up data revealed 137 alive no recurrence, 6 alive with disease, 1 alive with second primary cancer and 7 deceased (other causes). Metastatic disease developed in 8 patients (4.5%), detection date range 0.7-4.7 years.

Conclusion: The appropriate management of residual disease and/or adverse histopathological features post colonoscopic polypectomy is challenging in many cases and concerns of 'over-treatment' are often raised. Our study revealed that malignant nodes were harvested in 8% of patients and may guide clinicians and patients in their choice of treatment.

Biography

Karen Oliva has more than 40 years of experience in Medical research. Prior to data management, she worked as a Medical Scientist and was involved in various research streams such as infertility, *in vitro* fertilization (both marmoset and silverback gorilla studies as well as human), ovarian cancer, cardiovascular mouse models, gestational diabetes and mechanisms of labour. She has 38 publications and joined Cabrini Monash University, Department of Surgery in January 2011 as Colorectal Neoplasia Data Manager. Since joining, she has co-authored eight publications.

koliva@cabrini.com.au

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