

MEETING ABSTRACT

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# Our experience in surgery for colorectal cancer in elderly patients

F Mosca\*, M A Trovato, E Minona, C Il Grande, T R Portale, S Puleo

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## Background

The effectiveness of surgery for colorectal cancer depends on it being carried out safely, which allows most patients to return to productive lives. Since colorectal cancer is a major cause of morbidity and mortality in elderly people [1], this study was designed to evaluate the outcomes of surgery in elderly patients.

## Materials and methods

In the period 1973-2003, in our institution, we surgically managed 931 patients for colorectal cancer; 48 patients, 28 males and 20 females, aged 80 years and over (mean age 83.7 years). The tumor was located in the left colon in 20 cases (41.6%), in the rectum in 11 (22.9%) and in the right colon in 17 patients (35.4%). 33 patients (68.7%) were treated with colonic resection and primary anastomosis, 8 (16.6%) with Hartmann resection, 5 (10.4%) with colostomy, 1 (2%) with abdominal perineal resection and 1 (2%) with anastomosis between ileum and transverse colon without resection. The stage was A in 7 patients, B in 22, C in 12 and D in 7.

## Results

The operative mortality rate was 0. The infection of the surgical wound occurred in 10 patients, whereas 4 cases of bronchopneumonia took place (8.3%). We had also registered 1 anastomotic leak in a male patient with left colon cancer (2.08%). The median hospital stay was 13.1 days (range 9-22 days) and the 5 year survival was 56.2% (27/48). No patients had adjuvant therapy

## Conclusions

This study demonstrates that surgery should not be denied to elderly patients with colorectal cancer; age is not a limitation for surgery, tumour stage and co-

morbidity define the surgical treatment [2]. The morbidity and mortality figures for elective procedures are not different from the younger age population and favourable long-term outcome can be achieved by resectional surgery [3]. Diagnostic methods, rate of curative operations performed, staging, morbidity rate and 5-year survival rate are similar to younger patients. Finally the behaviour of colorectal carcinoma does not change with age and the age has no effect on the long-term survival of elderly patients.

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Department of Surgical Sciences, Organ Transplantation and Advanced Technologies, University of Catania, Catania, Italy, 95100, Italy