Conclusion:

The single-incision approach (right subcostal incision) is feasible and safe for patients with sigmoid colon or rectal cancer and synchronous liver metastases.

Objective:

The approach of simultaneous resection for patients with rectal and sigmoid colon cancer and synchronous liver metastasis remains controversial. This study was conducted in order to assess the safety and feasibility of the single surgical incision for patients with rectal and sigmoid colon cancer and synchronous liver metastasis who underwent simultaneous resection.

Methods:

A total of 42 patients with rectal and sigmoid colon cancer and synchronous liver metastasis who underwent simultaneous resection (or combined with intraoperative radiofrequency ablation) was identified from January 2012 to December 2016 in Cancer Hospital Chinese Academy of Medical Sciences. Clinicopathologic data, operative and perioperative outcomes were collected and analyzed retrospectively.

Results:

Overall, 26 (61.9%) patients underwent simultaneous resection with single surgical incision (right subcostal incision), and 16 (38.1%) were submitted to simultaneous resection with dual surgical incision (median incision of lower abdomen and right subcostal incision). The single-incision approach had shorter operation time (342.46 ± 15.27 vs. 343.13 ± 32.00 min, \(p<0.05\)), and had no significant difference compared to the dual-incision approach in total hospitalization time, postoperative hospitalization time, intra-operative blood loss, time of postoperative drainage tube extraction, time of defecation and postoperative complication (\(p>0.05\)).

Conclusion:

The single-incision approach (right subcostal incision) is feasible and safe for patients with sigmoid colon or rectal cancer and synchronous liver metastases.

Keywords:

Colorectal cancer; Simultaneous resection; Synchronous liver metastases; Feasibility; Surgical incisions

Focus on:

Comprehensive treatment for primary liver cancer, colorectal cancer with liver metastases and neuroendocrine tumor

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