

Free papers

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OP 2.4.6

Local invasion of colorectal cancer and spread to regional lymph nodes at the time of surgery.

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Introduction:

Colorectal cancers are the fourth commonest malignancy in Sri Lanka. This study was conducted to assess the extent of local invasion and spread to regional lymph nodes at the time of surgery.

Methods:

Retrospective study was conducted at professorial surgical unit of NHSL. Pathology reports and BHTs of all patients with histological diagnosis of colorectal cancer admitted to the unit from January 2005 to December 2008 were studied. Data were analyzed using descriptive statistics.

Results:

Of the 88 patients studied 51%, 21%, 14%, 11%, 3% had cancers in rectum, sigmoid colon, ascending colon, transverse colon and descending colon. Of the Rectal tumours 10% invades only upto submucosa (T1), 19% invades upto muscularis propria (T2), 57% invades upto subserosa(T3), in 14% tumour directly invades other structures or perforate visceral peritoneum(T4).

There were no T1stages in colonic cancers. In sigmoid colonic cancers 21% were in T2, 50% were in T3 and 29% were in T4. In rest of the colonic cancers 5% were in T2, 68% in T3 and 27% in T4 stage.

48% rectal cancers and 52% colonic cancers had no lymph nodes metastasis. 52% of rectal cancers and 33% of colonic cancers had metastasized to less than 3 lymph nodes. 10% of rectal cancers and 15% of colonic cancers had metastasized to more than 4 lymph nodes.

Discussion & conclusion:

At the time of presentation/surgery rectal tumours have a less local invasion compared to colonic tumours. Rectal cancers appear to metastasise to regional lymph nodes at an earlier stage of local invasion than colonic cancers.